NOTICE

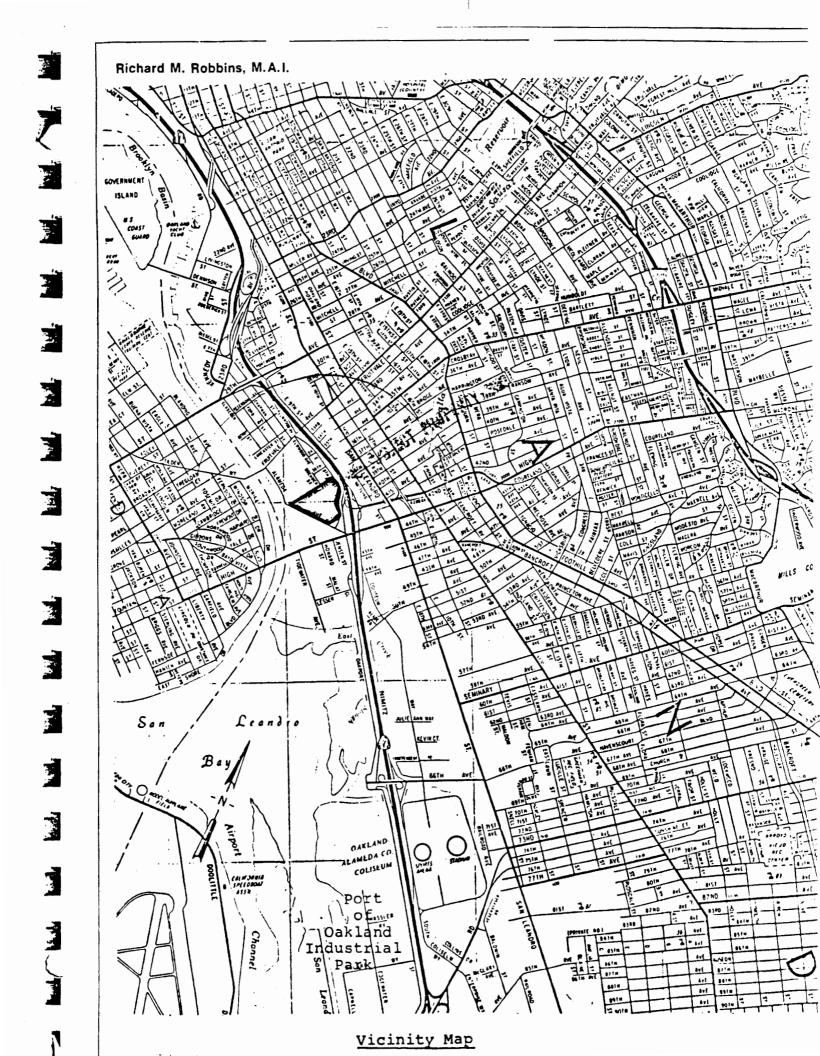
The official RCRA Permit file for this facility has been transferred to the California Department of Health Services under Phase II A authorization. The applicant is under no obligation to inform EPA of changes at this facility. This file may therefore be incomplete.

2/15/83

FORM	U.4. ENVIRONME	L INFORM		I. EPA I.D. NUMBER			TIAC
1 SEPA	Consolio	leted Permits Pi	roarem	C A D 009162			П
GENERAL	(Read the "Genen	al Instructions"	before starting.)	GENERAL INSTR			3 14 19
LABEL ITEMS		////		If a preprinted label has b	een pr	ovide	
I. EPA I.D. NUMBER	//////	.		it in the designated space. ation carefully; if any of i			
JIL FACILITY NAME	//////	///	///////	through it and enter the	correct	dete	in the
	' '	////	///////////////////////////////////////	appropriate fill—in area be the preprinted data is abso	low, Al	leo, if	eny of
FACILITY	//////	(left of the label space II	ets the	Info	mation
A. WVIFING VODEER	PLEASE PLACE	LABEL IN	THIS SPACE \	that ahould appear), pleas proper fill—in area(s) bein			
111111	' '	///,	///////////////////////////////////////	complete and correct, you	need i	not co	omplete
///////////////////////////////////////	//////	,		Items I, III, V, and VI of must be completed regard			
V. FACILITY	//////			I items if no label has been	provid	ted, F	Refer to
VI. LOCATION	'	///	///////	the instructions for data tions and for the legal a			
///////////////////////////////////////	. / / / / / /	(which this data is collected.			
II. POLLUTANT CHARACTERISTI							
INSTRUCTIONS: Complete A thr		r you need to	submit soy permit ennlication	forms to the EPA. If you so	neer "v	es" to	n anv
questions you must submit this for	cm and the supplemental for	rm listed in the	parenthesis following the que	istion. Mark "X" in the box in	the thi	ird col	lumn
if the supplemental form is attache	id. If you answer "no" to ea	ich question, ye	ou need not submit any of the	se forms. You may answer "no	o" if yo	HUT BC1	tivity
is excluded from permit requiremen	ts; see Section C of the instr	actions. See also	, Section D of the instruction	s for definitions of beld—face	terms.		
SPECIFIC QUESTIO	ONS YES	HO PORM	SPECIFIC O	PUESTIONS	YES	MARY	FORM
1		ATTACHED		(either existing or proposed)			ATTACHE
A, is this facility a publicly own which results in a dispharge to		x	include a concentrated	animal feeding operation or	, ,	\mathbf{x}	
(FORM 2A)			equatic enimal production discharge to waters of the	on facility which results in a U.S.? (FORM 2B)			
C. Is this a facility which currently		17 10	D. Is this a proposed facility	y (other than those described	10	20	21
to waters of the U.S. other the A or B above? (FORM 2C)	en those described in X	23 84	in A or 8 above) which waters of the U.S.? (FOR	will result in a discharge to M 2D)	1.5	X	87
				t at this facility industrial or			
E. Does or will this facility treet, hezardous westes? (FORM 3)	, store, or dispose of X	X		the lowermost stratum con-		x	
	10	29 30		arter mile of the well bore, trinking water? (FORM 4)		32	11
G. Do you or will you inject at this	facility any produced		H. Do you or will you injec	t at this facility fluids for spe-			
weter or other fluids which are in connection with conventional		х	cial processes such as m	ining of sulfur by the Fresch			
duction, inject fluids used for	enhanced recovery of	^		of minerals, in situ combus- covery of geothermal energy?		X	ı
oil or natural gas, or inject fluid hydrocarbons? (FORM 4)		33 34	(FORM 4)	covery or Section (the energy)	35		
I. Is this facility a proposed station	onery source which is	38 36		ed stationary source which is		 	
one of the 28 industrial categ structions and which will pote				ustriel categories listed in the will potentially emit 250 tons	1 1		
per year of any air pollutant	regulated under the	X	per year of any air pollut	ant regulated under the Clean	1 !	X	
Clean Air Act and may affect attainment area? (FORM 5)		41 42	Air Act and may affect (area? (FORM 5)	or be located in an attainment		44	
IIL NAME OF FACILITY	•						
A SKIP N N N N N N N					$\top \top$		
A M E R I C A	N. CAN.	P A C K	AGING. I	<u>. N. C </u>	45		
IV. FACILITY CONTACT		n					
	AME & TITLE (last, first, &	title)		. PHONE (area code & ло.)			
BERGESON	, DON MG	R. I	N D. E N G 41	5 536 2400			
11111				3 330 2400	<u>-1</u>		
V. FACILITY MAILING ADDRESS							
<u> </u>	A. STREET OR P.O. BOX	 					
3 3.8.0.1 EAS.	Т8. Т Н S Т	REF	T PO 2092				
11 10			45				
<u></u>	ITY OR TOWN	1111	C.STATE D. ZIP COI				
4 OAKLAND,			ÇA 94.604				
VI. FACILITY LOCATION			48 AT 48 87	आ			
	UTE NO. OR OTHER SPECI	FIC IDENTIFE	te I				
e i i i i i i i i i i i i i i i i i i i		-1					
5 3801EAS	T 8TH S T	REE	T			•	
19 15 B. CO	UNTY NAME						
, , , , , , , , , , , , , , , , , , , 	111111	111	-				
ALAMEDA		······································	74				
C. C	ITY OR TOWN	· · · · · · · · · · · · · · · · · · ·	D.STATE E. ZIP COI	DE F. COUNTY CODE			
		T T T		(if known)			
6 O.A.K. L. A.N.D.			CA 94601				
EPA Form 3510-1 (6-80)				<u> </u>		-	

CONTINUED FROM THE FRONT VH. SIC CODES (4-digit, in order of priority)				
A. FIRST			specify)	SECOND
3 4 1 1 Specify) METAL CAN MANUFA	CTURE	7	-F 777 /	
16 · 10		15 16 - 12	D.	FOURTH
(specify)			(specify)	
		7		
OPERATOR INFORMATION				
	A. NAME			B. is the name lister item VIII-A also
TO AN CAN DA	, , , , , , , , ,	N C.		owner?
AMERICAN CAN PA	CKAGING			YES 🗆 N
C. STATUS OF OPERATOR (Enter the appl	ropriate letter into the ansv	er box: if "Other".	pecify.)	D. PHONE (area code & no.)
-FEDERAL M - PUBLIC (other than	federal or state)	specify)	د	
STATE 0 = OTHER (specify)	P		A	
= PRIVATE				16 - 16 19 - 21 22 - 21
POIFAST 8TH STRE	ET POBOX	2 0 9 2	7	
801EAST 8TH STRE				
F. CITY OR TOW	N	G.STATE	H. ZIP CODE IX	INDIAN LAND
AKLAND	1 1 1 1 1 1 1 1	CA	9 4 6 0 2 18	the facility located on Indian lands?
				S2 YES INO
		40 41 42	17 - \$1	
HETING ENVIRONMENTAL PERMITS	(Air Emissio	e from Proposed Co		
A. NPDRS (Discharges to Surface Water)	D. PSD (Air Emission	T T T T T T	arces)	
$ \begin{array}{c cccccccccccccccccccccccccccccccc$	9 P			
B. UIC (Underground Injection of Fluids)	0 15 16 17 18 E. OTH	ER (specify)	30	
	<u> </u>	11111	(specify)	
[7] 18 - 3	9 17 18		30	•
C. RCRA (Hazardous Wastes)		ER (specify)		
C A D O O 9 1 6 2 1 1 6	9		(specify)	
	0 10 16 17 10		.3	
(6 17 16			.3	
MAP tach to this application a topographic ma	p of the area extending	to at least one mil	e beyond proper	ty bounderies. The map must show
MAP tach to this application a topographic mae outline of the facility, the location of e	p of the area extending	proposed intake a	nd discharge stru	actures, each of its hazardous waste
MAP tach to this application a topographic mage outline of the facility, the location of eletment, storage, or disposal facilities, and	p of the area extending each of its existing and deach well where it in	proposed intake a ects fluids underg	nd discharge stru	actures, each of its hazardous waste
tach to this application a topographic ma e outline of the facility, the location of e atment, storage, or disposal facilities, and the bodies in the map area. See instruction	p of the area extending each of its existing and d each well where it in as for precise requirement	proposed intake a ects fluids underg	nd discharge stru	actures, each of its hazardous waste
tach to this application a topographic ma a outline of the facility, the location of e atment, storage, or disposal facilities, and ther bodies in the map area. See instruction	p of the area extending each of its existing and d each well where it in as for precise requirement	proposed intake a ects fluids underg	nd discharge stru	actures, each of its hazardous waste
tach to this application a topographic ma a outline of the facility, the location of e atment, storage, or disposal facilities, and ther bodies in the map area. See instruction	p of the area extending each of its existing and d each well where it in as for precise requirement	proposed intake a ects fluids underg	nd discharge stru	actures, each of its hazardous waste
MAP tach to this application a topographic map outline of the facility, the location of eleatment, storage, or disposal facilities, and the bodies in the map area. See instruction	p of the area extending each of its existing and d each well where it in as for precise requirement	proposed intake a ects fluids underg	nd discharge stru	actures, each of its hazardous waste
map tach to this application a topographic map outline of the facility, the location of eleatment, storage, or disposal facilities, and the bodies in the map area. See instruction NATURE OF BUSINESS (provide a brief description)	p of the area extending each of its existing and deach well where it in as for precise requiremental properties.	proposed intake a ects fluids underg nts.	nd disch arge str i round. Include a	actures, each of its hazardous waste all springs, rivers and other surface
MAP tach to this application a topographic map outline of the facility, the location of eatment, storage, or disposal facilities, and the bodies in the map area. See instruction NATURE OF BUSINESS (provide a brief description)	p of the area extending each of its existing and deach well where it in as for precise requiremental properties.	proposed intake a ects fluids underg nts.	nd disch arge str i round. Include a	actures, each of its hazardous waste all springs, rivers and other surface
MAP Itach to this application a topographic map outline of the facility, the location of eletment, storage, or disposal facilities, and the bodies in the map area. See instruction NATURE OF BUSINESS (provide a brief description)	p of the area extending each of its existing and deach well where it in as for precise requiremental properties.	proposed intake a ects fluids underg nts.	nd disch arge str i round. Include a	actures, each of its hazardous waste all springs, rivers and other surface
map tach to this application a topographic map outline of the facility, the location of eleatment, storage, or disposal facilities, and the bodies in the map area. See instruction NATURE OF BUSINESS (provide a brief description)	p of the area extending each of its existing and deach well where it in as for precise requiremental properties.	proposed intake a ects fluids underg nts.	nd disch arge str i round. Include a	actures, each of its hazardous waste all springs, rivers and other surface
MAP tach to this application a topographic map outline of the facility, the location of eatment, storage, or disposal facilities, and the bodies in the map area. See instruction NATURE OF BUSINESS (provide a brief description)	p of the area extending each of its existing and deach well where it in as for precise requiremental properties.	proposed intake a ects fluids underg nts.	nd disch arge str i round. Include a	actures, each of its hazardous waste all springs, rivers and other surface
MAP tech to this application a topographic map outline of the facility, the location of eatment, storage, or disposal facilities, and ter bodies in the map area. See instruction NATURE OF BUSINESS (provide a brief descri	p of the area extending each of its existing and deach well where it in as for precise requiremental properties.	proposed intake a ects fluids underg nts.	nd disch arge str i round. Include a	actures, each of its hazardous waste all springs, rivers and other surface
map tach to this application a topographic map outline of the facility, the location of eleatment, storage, or disposal facilities, and the bodies in the map area. See instruction NATURE OF BUSINESS (provide a brief description)	p of the area extending each of its existing and deach well where it in as for precise requiremental properties.	proposed intake a ects fluids underg nts.	nd disch arge str i round. Include a	actures, each of its hazardous waste all springs, rivers and other surface
tach to this application a topographic mage outline of the facility, the location of elatment, storage, or disposal facilities, and the bodies in the map area. See instruction NATURE OF BUSINESS (provide a brief description)	p of the area extending each of its existing and deach well where it in as for precise requiremental properties.	proposed intake a ects fluids underg nts.	nd disch arge str i round. Include a	actures, each of its hazardous waste all springs, rivers and other surface
MAP Itach to this application a topographic male outline of the facility, the location of eleatment, storage, or disposal facilities, and atter bodies in the map area. See instruction. NATURE OF BUSINESS (provide a brief description). Manufacture of metal cans and	p of the area extending each of its existing and deach well where it in as for precise requiremental properties.	proposed intake a ects fluids underg nts.	nd disch arge str i round. Include a	actures, each of its hazardous waste all springs, rivers and other surface
MAP Itach to this application a topographic made outline of the facility, the location of eleatment, storage, or disposal facilities, and after bodies in the map area. See instructions. NATURE OF BUSINESS (provide a brief description) Manufacture of metal cans and disposal cans and disposal facilities.	p of the area extending each of its existing and deach well where it in as for precise requirementation)	proposed intake a ects fluids undergots.	and discharge structure. Include a	ectures, each of its hazardous waste all springs, rivers and other surface of sheeted timplate.
MAP Itach to this application a topographic made outline of the facility, the location of eleatment, storage, or disposal facilities, and after bodies in the map area. See instructions. NATURE OF BUSINESS (provide a brief description) Manufacture of metal cans and disposal cans and disposal facilities.	p of the area extending such of its existing and deach well where it in as for precise requiremental end - shearing.	proposed intake a ects fluids undergots. coating and	and discharge structured in printing of	of sheeted timplate.
tech to this application a topographic man outline of the facility, the location of eleatment, storage, or disposal facilities, and the bodies in the map area. See instruction NATURE OF BUSINESS (provide a brief description) and acture of metal cans and canufacture of metal cans and canufacture of law that I have prescribly under penalty of law that I have prescribed and that, based on my inquired.	p of the area extending such of its existing and deach well where it in as for precise requirementation. I end - shearing.	proposed intake a ects fluids undergots. coating and amfamiliar with mediately response	the information	submitted in this application and all the information contained in the
tach to this application a topographic man a coutline of the facility, the location of eleatment, storage, or disposal facilities, and the bodies in the map area. See instructions. NATURE OF BUSINESS (provide a brief description) and the bodies in the map area. See instructions and fanufacture of metal cans and fanufacture of metal cans and fanufacture of law that I have partify under penalty of law that I have particularly under penalty of law that I have particularly in the location, I believe that the information is a contraction of the location of	p of the area extending each of its existing and deach well where it in as for precise requirementation) I end - shearing and erronally examined and its true, accurate and comist true, accurate and comist true, accurate and comist area.	proposed intake a ects fluids undergots. coating and am familiar with mediately responsemplete, I am awa	the information	submitted in this application and all the information contained in the
MAP Itach to this application a topographic made outline of the facility, the location of eleatment, storage, or disposal facilities, and after bodies in the map area. See instructions. NATURE OF BUSINESS (provide a brief description). Manufacture of metal cans and displaying the possibility of law that I have put tachments and that, based on my inquiripplication, I believe that the information is law information, including the possibility of law information.	p of the area extending each of its existing and deach well where it in as for precise requirementation) I end - shearing and erronally examined and its true, accurate and comist true, accurate and comist true, accurate and comist area.	proposed intake a ects fluids undergots. coating and am familiar with mediately responsemplete, I am awa	the information	submitted in this application and all go the information contained in the significant penalties for submitting
MAP Itach to this application a topographic male outline of the facility, the location of eleatment, storage, or disposal facilities, and atter bodies in the map area. See instructions. NATURE OF BUSINESS (provide a brief description of the facility of	p of the area extending each of its existing and deach well where it in as for precise requirementation) I end - shearing and erronally examined and its true, accurate and comist true, accurate and comist true, accurate and comist area.	proposed intake a ects fluids undergots. coating and am familiar with mediately responsemplete, I am awa	the information	submitted in this application and all the information contained in the
	p of the area extending each of its existing and deach well where it in as for precise requirementation) I end - shearing and erronally examined and its true, accurate and comist true, accurate and comist true, accurate and comist area.	proposed intake a ects fluids undergots. coating and am familiar with mediately responsemplete, I am awa	the information	submitted in this application and all go the information contained in the significant penalties for submitting

C



				- 304660 101 611	E (VWE. 1.	c /4	Lilard	1612/1	116117.									rom	Αφριον	eu U11	10 140.	1000		~	_	_
FO	_	1	_				U.S	NVIB	ONN	ENT	ALP	ROTE	CTIO	AG	ENC	710	A.	I. EP	A I.D.	NUM	BER					
Ç		13	3		ł	HAZ.	Αĭ	יטוּ	S W/	AS I lidam	t Pt	=KM mits f	IT A	TL	ICA	110	, IA	FC	A D	0 0	9 1	6	1 1	1	6	1
RC		1	Y		ı	(Thi	is info	matio	n is n	quin	ed un	der Se	ction 3	005	of R	RA.)		ΔID	0 0	1 5 j -	4	4.		11111	13
		FF	ici	AL USE ON	Y																					
PP		ATI	ON	DATE RECE	IVED										C	MM	ENT\$									_
عم	T	Ť		11111																						- 1
	23	1		124	2.9																	_	-			
I. F	IR	ST	OR	REVISED	PPLICA	ATIO	N																			
evis	ed a	ppl	icat	the appropriation. If this is your in Item I ab	our first	A or E applic	B belo ation	w (mai and yo	rk on ou air	e box	know) to it your	dicate facility	where's El	her to A I.	his is D. Nu	the first a mber, or i	pplicati f this is	ion you a revise	are su ed app	bmittin lication	g for , ente	your r you	r facil	ility'	s
	IR	ST	ĀP	PLICATION	(place an	"X"	belou	and p	rovid	e the	appro	opriet	e date)													\neg
		1. 1	EXI	STING FACIL	Cor	mpiete	ttem	DEIOM	.,									□ 2.6	EW FA	CILIT	F(POVI	EW I	FACI	LITI	
8	F	Ţ.	1	MO. DAY	OPERA (use the	TION	BEG	AN OF	t THI	PRO	TE C	THE	RUCTI	ON O	OM	A ENC	ED.					ON	BEG/	NN O	R IS	
3. F	EV		ΕĐ	APPLICATI				elow a	nd co	mple	te Ite	m I al	ove)						FACILI			RA	PERI	MIT		
	. 73			CILITY HAS IF														72	ACIE							
	_			SES – CODE																						
6 8. P	RO A	ribe CES MC	the SS (CODE — Enter des, If more line process (Inclus DESIGN CAPA) IT — Enter the F MEASURE — used. Only the	es are nei ding its di CITY — I amount, - For seci	eded, i <i>ssign d</i> For ee h amo	enter capaci ich cod ount ei	the co ity/ in de enti ntered	de(s) the sp ered i in co	in the sece p n col-	e spec provid umn / B(1),	se pro led on A enti , ente	vided, the for ir the co the co	if a p rm (/ spaci	tem ty of	the p	rocess.	net is n	iot inciu	KONG IF	i the list	OTC	90 6 5	Delov	4 ,, 111 4	m
					PF	RO-	APP	ROPR	IATE	UNI	TS O	F							PRO	-	PPROP					- 1
			PF	ROCESS		ESS PDE		ASURE DESIG				S				ROC	ESS.		CES	_	IEASUF DESI					_ [
Ste	ereg	e:											Tre	etme	mt:											ı
CC	NT	AIF	NEF	t (barrel, drum,				ONS					TA	NK					TOI		LLONS			YOF	ł	ı
w	NK	E P	ILE	:		03	CUBIC	CYAR	IDS C		-		SU	RFA	CE II	4PQU	NDMEN	r	T01	G A	TERS P	PEF	DA	Y 0 F	1	- 1
•		•	E 18	MPOUNDMEN'																						
•	~ F	~~				04	GALL	.ON\$	ORL	TER	5		110	INE	RAT	OR			TOS	T TO	INS PER	TONS	URC	1 HO	UR:	
Di	pos	ei:											180	INE	RAT	OR			T01	ME GA	INS PEI	ONS PE	PEF	UR	UR: OR	
Di	pos	el:	ON .	WELL		79	GALL	ONS (OR L	TER	s me th	at					hyeical, c	hemica		GA	INS PER ETRIC 1 (LLON! TERS P	PER H	UR C PEF HO HOUF DA	UR	R	
Di	JEC	el:	ON .			79	GALL ACRE would depth	ONS (OR L T (the	volu cre (s me th	at	OT the pro	H E R rmal cess	(Use or bi	for pologic	physical, c cal treatm erring in to	nks,		GA	NS PER ETRIC 1 LLONS TERS P	PER H	UR C PEF HO HOUF DA	UR	R	
	ND ND	TIC	ON LL	WELL ICATION	0	079 080	GALL ACRE would depth HECT ACRE	ONS (E-FEET cover of one ARE-I	OR L T (the one of t foot MET! HEC	TER volu cre () OR (R	s me th o a	at	OT the pro sur ato	HER rmal cess face	(Use or bi is not impo	for pologic occu undm	erring in to ents or in e processe	nks, ciner- s in		GA	INS PER ETRIC 1 (LLON! TERS P	PER H	UR C PEF HO HOUF DA	UR	R	
Di N	JEC NO	TIC FIL	PPL	WELL ICATION POSAL	5	079 080 081	GALL ACRE would depth HECT ACRE GALL LITE!	ONS (I-FEET COVER OF ORE- IS OR ONS I	OR L T (the one of t foot MET! HEC PER!	VOLUMENT (FOR TARIOTAL)	s me th o a ES OR	iat	OT the pro sur ato	HER rmal cess face	(Use or bi is not impo	for pologic occu undm	erring in to ents or in	nks, ciner- s in		GA	INS PER ETRIC 1 (LLON! TERS P	PER H	UR C PEF HO HOUF DA	UR	R	
Di N	JEC NO	TIC FIL	PPL	WELL ICATION	0 0 7	079 080 081 082	GALL ACRE would depth HECT ACRE GALL LITE!	ONS	OR L T (the one of t foot MET! HEC PER!	VOLUMENT (FOR TARIOTAL)	s me th o a ES OR	at	OT the pro sur ato	HER rmal cess face	(Use or bi is not impo escri e pro	for pologic occu undm be th vided	erring in to ents or in e processe l; Item III	nks, ciner- s in		GA	INS PER ETRIC 1 (LLON! TERS P	PER H	UR C PEF HO HOUF DA	1 HO	P.	ne.
Di N	JEC NO	TIC FIL	PPL	WELL ICATION POSAL	T D	079 080 081	GALL ACRE would depth HECT ACRE GALL LITE: GALL	ONS (I-FEET COVER OF ORE- IS OR ONS I	OR L T (the one of g foot MET! HEC PER! OR L	ITER volument (i) OR IR TAR TAR Y ITER	is me th o a ES OR		OT the pro sur ato the	HER rmal cess face	(Use or bi is not impo escri e pro	for pologic occu andm be thi vided	orring in to lents or in e processe l; Item III OF URE	nks, ciner- s in -C.)	, то 4	MI GA LI	INS PEI	PER H	UR C PEF HO OUF	UF OF	NIT C	RE
	NO.	AFIL N E	PPL DISI E IM	WELL ICATION POSAL MPOUNDMENT	T S	DOTS DOS DOS DOS DOS DOS DOS DOS DOS DOS DO	GALL ACRE Would depth ACRE GALL LITE: GALL OF JRE	ONS (I-FEET COVER OF ORE- IS OR ONS I	OR L T (the one of foot MET! HEC PER! OR L	TER	is me th o a es OR is	ASUR	OT the pro sur oto the	HER rmal cess face rs. I spac	(Use or bi is not impo escri e pro	for pologic occu undm be the vided	oring in to ents or in e processes; Item III	nks, ciner- s in ·C.)	L TO4	MEAS	EURE	HO FONS PEI ER H B PEI ER C	PER HO	UI ME	NIT C ASU	RE
	NO.	AFIL OF	PPL DISI E IN	WELL ICATION POSAL MPOUNDMEN	T E	DOTO DOTO DOTO DOTO DOTO DOTO DOTO DOTO	GALL ACRE Would depth ACRE GALL LITE: GALL OF JRE	ONS (I-FEET COVER OF ORE- IS OR ONS I	OR L T (the one of one	TER VOIU CON (C) OR TAR TAR TAR TAR TAR TAR TAR TA	ES OR	ASUR	OT the prosure at the the	HER rmai cessi face rs. I spac	(Use or bits not imported pro	for pologic occurrence the third wided	oring in to sents or in sents or in sents or in sents or in sent sent sent sent sent sent sent sen	nks, ciner- s in -C.)	NIT OF	MEAS	URE	HO FONS PET ER H B PET ER C	PEF HO IOUF R DA	UI ME	NIT CASU	RE
Direction and the second secon	IPON INC.	OF ON	ME IM	WELL ICATION POSAL MPOUNDMENT EASURE	C C C C C C C C C C C C C C C C C C C	079 080 081 082 083 UNIT IEASU COD	GALL would depth HECT GALL UTE: GALL OF JRE	ONS (I-FEET COVER OF ORE- IS OR ONS I	OR LET (the stoom to the stoom	TERESTAND TO SERVICE STATE OF SERVICE ST	ES OR IS	ASUR DAY OUR	OT the prosure ato the	HER rmai cessi face rs. L spac	(Use or bits not imposes of the pro	for pologic occurrence the thickness occurrence the thickness occurrence to the thickn	oring in to leants or in leants	unks, ciner- s in ·C.)	I TO	MEAS	URE	PHO FONS PER ER H ER C	PEF HOUF R DA	UP OF	NIT C ASU ODE	RE
Direction and the state of the	IPOI	AFILIAN ACION OF MACION	ME IM	WELL ICATION POSAL MPOUNDMENT ASURE	T E	079 080 081 082 083 UNIT IEASU COD	GALL ACRE Would depth HECRE GALL LITE: GALL JRE	LONS (I-FEET I cover of one IS OR LONS (RS PE)	OR L. T (the one of foother one of the one o	TOILUITER	ES OR ES PER HIS TON PER HIS PER	ASUR DAY OUR IS PEI IR HO	OT the product of the surrection of the surrecti	HER rmail face rs. I space	(Use or bits not imported processing process	for pologic occurrence in the pologic occurr	oring in to lents or in eprocesse; Item III	uks, ciner- s in -C.) UN AC HE	HIT OF	MEAS ET	URE	PHOTONS PET	UR C	UI ME	NIT C ASU CODE	RE
DE INC. LO SU UI GLICUGIX	IPOI	OF ON A CONTRACT	ME IM	EASURE	T C	079 080 081 082 083 UNIT (IEASU COD G	GALL ACRE Would depth ACRE GALL OF JRE	IONS (I-PEET (I cover of one of the cover of one of the cover of the	OR L. OR L. OR C. FOOI METI FR DA OR L. UN LIT TOE GA LIT	TERS	ES OR ES OF ME/	ASUR DAY OUR IS PE IR HOU!	OT the property of the state of	HER rmai cess face rs. I space	(Use or bits not imported processing process	for pologic occurred be the vided	oring in to leents or in e processe i; Item III OF URE DE V D W E H H Last two stores	uks, ciner- s in -C.) UN AC HE	HIT OF	MEAS ET	URE	PHOTONS PET	UR C	UI ME	NIT C ASU CODE	RE
Dink.	IPOI	OF ON A CONTRACT	ME IM	EASURE DS ER DAY R COMPLETII	T C	0779 080 082 083 JNIT IEASU COD 	GALL ACRE Would depth ACRE GALL OF JRE	LONS (PEET (OR L. OR L. OR C. FOOI METI FR DA OR L. UN LIT TOE GA LIT	TERS	ES OR ES OF ME/	ASUR DAY OUR IS PE IR HOU!	OT the property of the state of	HER rmai cess face rs. I space	(Use or bits not imported processing process	for pologic occurred be the vided	oring in to leents or in e processe i; Item III OF URE DE V D W E H H Last two stores	uks, ciner- s in -C.) UN AC HE	HIT OF	MEAS ET	URE	PHOTONS PET	UR C	UI ME	NIT C ASU CODE	RE
DIN LOCAL COLOR X	IPOI NA PRINTER CONTRACTOR CONTRA	OF ON A CONTRACT	ME IM	EASURE	T C	079 080 082 083 UNIT IEASU COD G 	GALL ACRE Would HECT ACRE LITE: GALL OF JRE	IONS (I-PEET I COVET OF ONE IN TERMINATIONS (IN TIME	OR L. OR L. OR C. FOOI METI FR DA OR L. UN LIT TOE GA LIT	TERS	ES OR ES OF ME/	ASUR DAY OUR IS PE IR HOU!	OT the property of the state of	HER rmai cess face rs. I space	(Use or bits not imported processing process	for pologic occurred be the vided	OF URE DE V B B B B B B B B B B B B B B B B B B	UN AC HE	NIT OF	MEAS MEAS	SURE	d 200	UR C	UI ME	NIT C ASU CODE	RE
DIEL LOS SU UI GLICLOS XX TO LE SU L	NOA NOA NOT THE COMMENT COMMEN	OF ON A CONTRACT	ME IME	EASURE DS ER DAY R COMPLETII 400 gellons. T	T C	279 280 283 283 283 283 283 200 200 200 200 200 200 200 200 200 20	GALLACRE Would he would depth HECT ACRE GALL LITE: GALL	in line	OR L. T (the one of the one of th	TERS	ESOR ES PER HILL TO NO PER HILL TO N	ASUR DAY OUR IS PEI IS PEI HOU! Ind X burn	E R HOUR 2 below	HERMale cession control of the cession	(Use or bit or b	for pological control of the pological control	OF URE DE V B B B B B B B B B B B B B B B B B B	UN AC HE	HIT OF	MEAS MEAS	SURE	d 200	UR C	UI ME	NIT CASU	ne
DINA LO SU UI GLICUGA EXTERNA	NDA NEA NIT	OF ON A OF ON	ME IM	EASURE DS BR DAY R COMPLETII 400 gailons. T	M M M M M M M M M M M M M M M M M M M	00100000000000000000000000000000000000	GALLACRE Would he would depth HECT ACRE GALL LITE: GALL	in line	OR LET (the one of the	ITERUSCIE (CONTROL OF CONTROL OF	ES OR	ASUR DAY OUR IS PE IN HOU HOU! HOU! FOR	E R HOU DUR 2 beion up to 2	HERITAGE PROCESSES A. L. SPOCE	(Use or bit or b	for pological control of the pological control	OF URE DE V B B B B B B B B B B B B B B B B B B	UN AC HE	NIT OF	MEAS MEAS	SURE	d 200	UR C PEF F HO IOUF P DA	V OF	NIT CASU	RE
DISTOR DISTORDER NO. 10 THE WARMON	A. C.C.	N A O N S Y M N E h	ME IN ME	EASURE DS BR DAY R COMPLETII 400 gailons. T	T D MM	DOTE STORY OF THE	GALLACRE Would he would depth HECT ACRE GALL LITE: GALL	in line	OR LET (IMPERIENCE OF LETTY)	TERMINE TO STATE TO S	ES OR	ASUR DAY IS PE IR HG HOU IN MID X	E R HOU DUR 2 beion up to 2	HERITAGE PROCESSES A. L. SPOCE	(Use or bill o	for property of the control of the c	OF URE DE V B B B B B B B B B B B B B B B B B B	UN AC HE	NIT OF	MEAS MEAS	SURE	TONS PER SER CONTRACTOR OF THE PER CONTRACTO	URIT OF THE STATE	UIR CONTRACTOR OF THE CONTRACT	NIT CODE	RE
DISTOR DISTORDER NO. 10 THE WARMON	A. C.C.	ON A OF MAN BE OF PEO	ME IME IS ARTISP FOOD	EASURE BR COMPLETII 400 gailons. T	T E M	DOTE STORY OF THE	GALLACRE Would he would depth HECT ACRE GALL LITE: GALL	IONS (I-PEET OF ONE OF ONE OF ONE	OR LE (Ind. 1) OR LE	ITERIORIE I CONTROL I CONT	ES OR IS FME/	ASUR OUR IS PE IS HO IS PE IS HO IS PE IS HO IS PE IS	E E C C C C C C C C C C C C	HER rmale face cesse face rs. I space	(Uses or bit so not impose process or bit so not impose process or be process or bit so not impose proc	for prologic occurrence occurrenc	OF URE DE V B B B B B B B B B B B B B B B B B B	UN AC HE	NIT OF	MEAS MEAS	SURE	d 200	URIC PER INDUSTRIAL PROPERTY OF THE PROPERTY O	UIR CONTRACTOR OF THE CONTRACT	NIT CASU	RE
DINCE LINE AND THE PROPERTY OF	A. C. C. (free at	OF ON A CO ON THE OF TH	ME IME IS ARTISP FOOID	EASURE BR COMPLETII 400 gailons. T	MM ITEM	DOTE STORY OF THE	GALLACRE Would he would depth HECT ACRE GALL LITE: GALL	in line	OR LA (Ithe Ithe Ithe Ithe Ithe Ithe Ithe Ithe	TERMINE TO THE PROPERTY OF THE	ES OR	ASUR OUR IS PE IS HO IS PE IS HO IS PE IS HO IS PE IS	E 2 below up to 2	HERICESSI (ACCOUNTS OF THE COUNTS OF THE COU	(Use or bill o	for prologic occurrence occurrenc	OF URE DE V B B B B B B B B B B B B B B B B B B	UN AC HE	NIT OF	MEAS MEAS	SURE	d 200	UNIT MEAURE	UIR CONTRACTOR OF THE CONTRACT	NIT CASU	RE
Diri Los Sur Digition State Surial Surial Control Cont	A. C.	OF ON A CO ON THE OF TH	ME IME IS ARTISP FOOD	EASURE BR COMPLETII 400 gailons. T	T E M	DOTE STORY OF THE	GALLACRE Would he would depth HECT ACRE GALL LITE: GALL	IONS (I-PEET OF ONE OF ONE OF ONE	OR LA (Ithe Ithe Ithe Ithe Ithe Ithe Ithe Ithe	ITERIORIE I CONTROL I CONT	ES OR IS FME/	ASUR OUR IS PE IS HO IS PE IS HO IS PE IS HO IS PE IS	E E C C C C C C C C C C C C	HERICESSI (ACCOUNTS OF THE COUNTS OF THE COU	(Uses or bit so not impose process or bit so not impose process or be process or bit so not impose proc	for prologic occurrence occurrenc	OF URE DE V B B B B B B B B B B B B B B B B B B	UN AC HE	NIT OF	MEAS MEAS	SURE	d 200	URIC PER INDUSTRIAL PROPERTY OF THE PROPERTY O	UIR CONTRACTOR OF THE CONTRACT	NIT CASU	RE
Din L	A. C.	OF ON A OF ON	ME IME IS ARTISP FOOID	EASURE BR COMPLETII 400 gailons. T	MM ITEM	DOTE STORY OF THE	GALLACRE Would he would depth HECT ACRE GALL LITE: GALL	IONS (I-PEET OF ONE OF ONE OF ONE	OR LA (Ithe Ithe Ithe Ithe Ithe Ithe Ithe Ithe	TERMINE TO THE PROPERTY OF THE	ES OR IS FME/	ASUR OUR IS PE IS HO IS PE IS HO IS PE IS HO IS PE IS	E 2 below up to 2	HERMINGESSE (ace space)	(Uses or bit so not impose process or bit so not impose process or be process or bit so not impose proc	for prologic occurrence occurrenc	OF URE DE V B B B B B B B B B B B B B B B B B B	UN AC HE	NIT OF	MEAS MEAS	SURE	d 200	URIC PER INDUSTRIAL PROPERTY OF THE PROPERTY O	UIR CONTRACTOR OF THE CONTRACT	NIT CASU	RE
DIEL LO SO LICUS X TO	A. C.	OF ON A CONTRACTOR OF THE OF T	ME ME ME S. ARTISPOID OSEIN 12	EASURE BR COMPLETII 400 gailons. T	NG ITEM NG ITEM NG ITEM (specify)	DOTE STORY OF THE	GALLACRE Would he would depth HECT ACRE GALL LITE: GALL	IONS (I-PEET OF ONE OF ONE OF ONE	OR LA (Ithe Ithe Ithe Ithe Ithe Ithe Ithe Ithe	TERMINE TO THE PROPERTY OF THE	ES OR IS FME/	ASUR OUR IS PE IS HO IS PE IS HO IS PE IS HO IS PE IS	E 2 below up to 2	HERMINGESSE (ace space)	(Uses or bit so not impose process or bit so not impose process or be process or bit so not impose proc	for prologic occurrence occurrenc	OF URE DE V B B B B B B B B B B B B B B B B B B	UN AC HE	NIT OF	MEAS MEAS	SURE	d 200	URIC PER INDUSTRIAL PROPERTY OF THE PROPERTY O	UIR CONTRACTOR OF THE CONTRACT	NIT CASU	RE
DIEL LOS SU DIGLICIOS XINTE MAISMON	A. C.	O O N A C O O N A C O O N A C O O N A C O O O O O O O O O O O O O O O O O O	ME IME	EASURE DS ERS ER DAY PR COMPLETII 400 gallons. T	NG ITEM NG ITEM NG ITEM (specify)	DOTE STORY OF THE	GALLACRE Would he would depth HECT ACRE GALL LITE: GALL	IONS (I-PEET OF ONE OF ONE OF ONE	OR LA (Ithe Ithe Ithe Ithe Ithe Ithe Ithe Ithe	TENTRUCIES OF THE STATE OF THE	ES OR IS FME/	ASUR OUR IS PE IS HO IS PE IS HO IS PE IS HO IS PE IS	E 2 beion the St 2 beion to 2	HERMINGESSE (ace space)	(Uses or bit so not impose process or bit so not impose process or be process or bit so not impose proc	for prologic occurrence occurrenc	OF URE DE V B B B B B B B B B B B B B B B B B B	UN AC HE	NIT OF	MEAS MEAS	SURE	d 200	URIC PER INDUSTRIAL PROPERTY OF THE PROPERTY O	UIR CONTRACTOR OF THE CONTRACT	NIT CASU	RE
DIEL LOS SU DIGLICIO XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	A. C.	O O N A C O O N A C O O N A C O O N A C O O O O O O O O O O O O O O O O O O	ME IME	EASURE DS ERS ER DAY PR COMPLETII 400 gallons. T	NG ITEM NG ITEM NG ITEM (specify)	DOTE STORY OF THE	GALLACRE Would he would depth HECT ACRE GALL LITE: GALL	IONS (I-PEET OF ONE OF ONE OF ONE	OR LA (Ithe Ithe Ithe Ithe Ithe Ithe Ithe Ithe	TENTRUCIES OF THE STATE OF THE	ES OR IS FME/	ASUR OUR IS PE IS HO IS PE IS HO IS PE IS HO IS PE IS	E 2 beion the No. 1	HERMINAL COSTS OF THE PROPERTY	(Uses or bit so not impose process or bit so not impose process or be process or bit so not impose proc	for prologic occurrence occurrenc	OF URE DE V B B B B B B B B B B B B B B B B B B	UN AC HE	NIT OF	MEAS MEAS	SURE	d 200	URIC PER INDUSTRIAL PROPERTY OF THE PROPERTY O	UIR CONTRACTOR OF THE CONTRACT	NIT CASU	RE
DIEL LOS SU DIGITALISMON C-1 2	A. C.	O O N A C O O N A C O O N A C O O N A C O O O O O O O O O O O O O O O O O O	ME IME	EASURE DS ERS ER DAY PR COMPLETII 400 gallons. T	NG ITEM NG ITEM NG ITEM (specify)	DOTE STORY OF THE	GALLACRE Would he would depth HECT ACRE GALL LITE: GALL	IONS (I-PEET OF ONE OF ONE OF ONE	OR LA (Ithe Ithe Ithe Ithe Ithe Ithe Ithe Ithe	TENTRUCIES OF THE STATE OF THE	ES OR IS FME/	ASUR OUR IS PE IS HO IS PE IS HO IS PE IS HO IS PE IS	E 2 below the Sur	HERMANIA COSTA CONTROL OF THE PROPERTY OF THE	(Uses or bit so not impose process or bit so not impose process or be process or bit so not impose proc	for prologic occurrence occurrenc	OF URE DE V B B B B B B B B B B B B B B B B B B	UN AC HE	NIT OF	MEAS MEAS	SURE	d 200	URIC PER INDUSTRIAL PROPERTY OF THE PROPERTY O	UIR CONTRACTOR OF THE CONTRACT	NIT CASU	RE

																	•
					N OF WAZARDOUG WASTE												
. EP	H	A2	AF	DO:	N OF HAZARDOUS WASTE SUS WASTE NUMBER — Enter is swestes which are not listed in 4 sixic contaminents of those hazard	the 10 C	FR,	Şu	bps	num ert D	nber , en	r fr	th	40 e fo) CFR, S our—digit	ibpart D fo number(s)	or each listed hazardous waste you will handle. If you from 40 CFR, Subpart C that describes the characteris-
bes	is. F	For	88	ch c	NNUAL QUANTITY — For each haracteristic or toxic contaminant et characteristic or contaminant.	listi t eni	ed v	d in	coi	ntero lumr	ed i	n c est	imi	ımn ete	A estim the total	ste the qua ennual qua	entity of that waste that will be handled on an annual nitry of all the non-listed waste(s) that will be handled
	IT (EAS	URE — For each quantity entere	ed ir	· co	lurr	ın E	ent	ter 1	the	ur	nit (of measus	e code. Un	of measure which must be used and the appropriate
				EN	GLISH UNIT OF MEASURE					COL	Œ				MET	RIC UNIT	OF MEASURE CODE
				PO	UNDS				٠.	. P					KILO	GRAMS .	
					NS										MET	RIC TONS	
occ.	bun	t t	he s	ppr	s use any other unit of measure opriate density or specific gravity	for (quar the v	ntit NB S	y, t te.	he u	ınitı	8 01	fm	1985	ure must	be convert	ed into one of the required units of messure taking into
	to i	ndi r nd tai t ci	icat on- ned hard	e ho -listi i in octe	ow the waste will be stored, treate ad hazardous wastes: For each of Item III to the processes of the processes of toxic contaminant.	id, ai chers cesse	nd/c scter s th	ord risti set v	ispo ic o will	r to: be :	of a xic used	cor d to	he ntai o si	faci min tore	ility. eant enter 1, trest, s leded: (1	ed in colur nd/or dispo	le(s) from the list of process codes contained in item III mn A, select the code(s) from the list of process code; see of all the non—listed hazardous wastes that posses: - first three as described above; (2) Enter "000" in the additional code(s).
OTE ore 1.	: h han Sel qui In "in	iA: oct ect ent coi	ZAI ne E on ity um	RDC PA e of of ti n A	DUS WASTES DESCRIBED BY F Hazerdous Weste Number shell be the EPA Hazerdous Waste Numb he waste and describing all the pro of the next line enter the other th above" and make no other entr	MOR e der pers pees EP/ ries d	IE 1 end es t A Ho	PHA ent o b ezer	an er i e us rdou	ONE the i t in o ed t us W	form colu o tr	PA n es umi rest	H# s fo n A t, st	AZ.A ollo 1. O tors	ARDOUS ws: n the sam , and/or or that car	WASTE N e line comp dispose of to be used to	o describe the waste. In column D(2) on that line ente
KAN r ye	PL ar (E I	Of thre	R CI	shavings from leather tenning an	<i>line</i> nd fir	e <i>nu</i> nish	<i>mb</i> ing	ers ope	X-1, pretic	X-; on. of	2, 2 In eac	X-3; ack	, an ditio	od X-4 bea	ow) — A fa cility will to ther waste	dous wests. actility will treat and dispose of an estimated 900 pound reat and dispose of three non-listed wastes. Two waste is corrosive and ignitable and there will be an estimate
		١. ١	EP/				UNI										D. PROCESSES
ŽÓ	H A W A (en	ST	CO	D. 10 10	B. ESTIMATED ANNUAL QUANTITY OF WASTE	1	u Ri inte	-			1.	. P1	RO	CE!	ss code (er)		2. PROCESS DESCRIPTION (if a code is not entered in D(1))
-1	K	0	5	4	900		P		T	o'	3						
:-2	D	0	0	2	400		P		T	0	3	D		0	1 1	1 7 7	
(-3	D	0	0	1	100		P		T	0	1		8		1 1		
(-4	D	ò	0	2								T		1		1	included with above
A F	OT	3!	10	3 (5-80)	-			-		<u> </u>		F	2 (OF 5		CONTINUE ON PAG

R FOR DESCRIBING OTHER PROCESSES (code "T

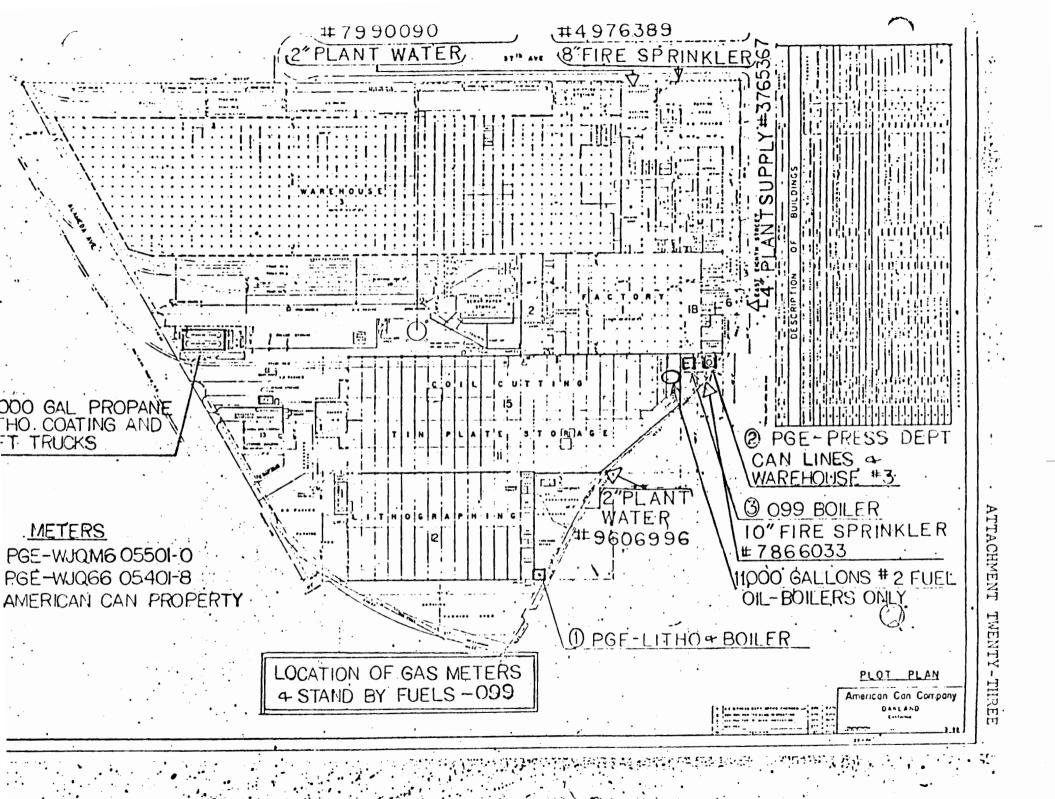
FOR EACH PROCESS ENTERED HERE

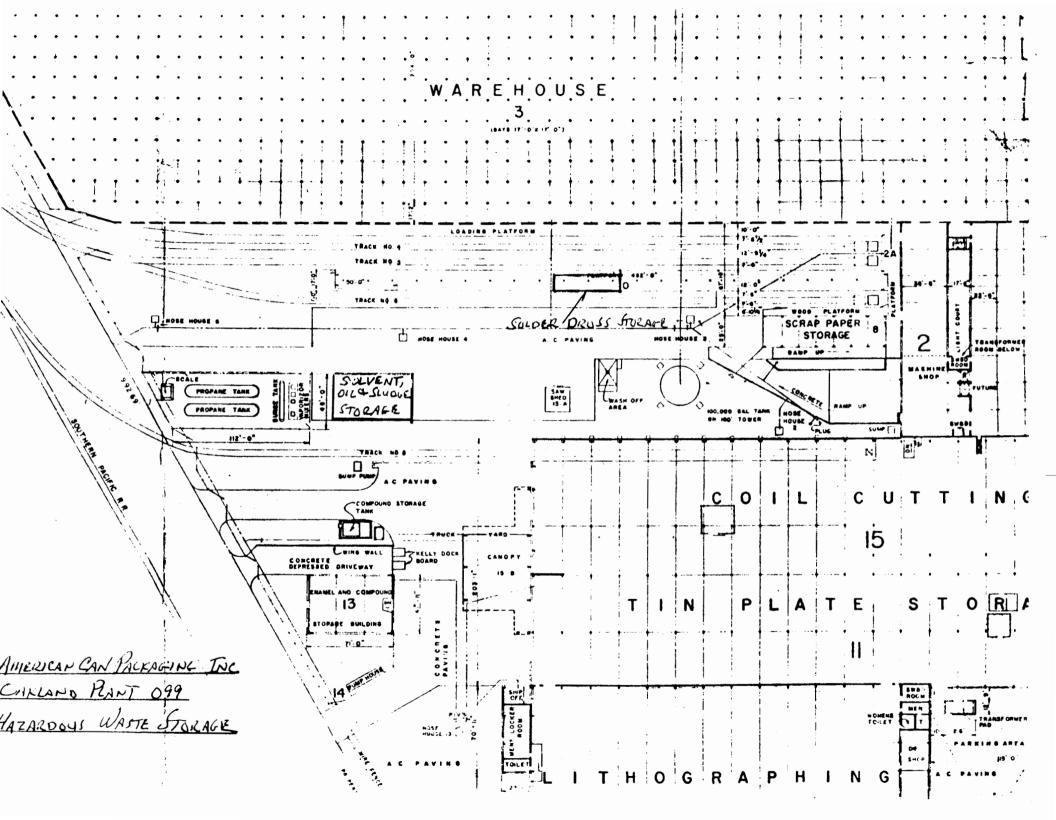
III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS COLINCLUDE DESIGN CAPACITY.

Contin NOTE:	Continued from page 2. NOTE: Photocopy this page before completing if vo						eve mor		more than 26 wastes to list.										Form Approved OMB No. 158-S80004		
	T-	Т			BER (enter from page 1)			\ \	Ŀ	1					-		IAL	USE	.AC		
1 1				0	- 13 14 18	7	7	7	_	12					Dι	Р			2 DUP		
IV. I	ı			\neg	N OF HAZARDOUS WAS		<i>(co</i>		_	d)									D. PROCESSES		
NO.	H	A. I AZ. AST	AR E!	D.	B. ESTIMATED ANNUAL QUANTITY OF WASTE	د e	F M SUF (ent code	EA-						(en	ter)	ODE			2. PROCI	ESS DESCRIPTION not entered in D(1))	
1	F	0	0	3		38	P			T) 1	T	1	T **	87	- 19	27	- 19			
2	D	0	0	8	40000		P		s	0	1		1	1				•			
3	D	0	0	1	90000		P		s	0) 1			1		- f]				
4	D	0	0	9	50		P		s	0) 1		7	ı		1		r			
5	υ	0	1	3	100		P		s	0) 1					- T		,			
6	ם	0	0	2	2000		P		s	0) 1			1		1	'	1			
7										1	1		T	T		1	'				
8										1	1		1	r		1					
9											ı		1	1		T					
10										1	1		Ī	1	,	1		1			
11										T	T		ľ	1		7					
12										1	1		-1	1		1					
13										1	1		7	Τ-		T		1			
14								T.			1		1	1		7		1			
15										T	ī		T	1	1	T		1			
16										T	1	T	1	Τ-	'	J		· · · ·			
17										1	1		1	T		1	'	T			
18										1		T	T	1	'	1		1		****	
19										T	1			1	ı	1		T			
20										1	Ī		T	T		ł		Т			
21										T	т-		T	1		1	Γ'	T			
22										T	Т		1	1		1					
23										Τ-	T		ī	1		1		T			
24										τ_	T		1	1		1	Γ			***	
25										T	1		1	Т	T	7		7			
26	23			28	:7 ·		L				7	1	Τ			7	l	<u> </u>			
EPA F		3:				5	34		17	_	2.0	1 3	<u> </u>	29	137	29	1 17	- 29		CONTINUE ON REVERSE	

Continued from the front.		
IV. DESCRIPTION OF HAZARDOUS WASTES (co	ntinued)	
E. USE THIS SPACE TO LIST ADDITIONAL PRO	CESS CODES FROM ITEM D(1) ON PAGE 3.	
and the second s		
EPA I.D. NO. (enter from page 1)		
FCAD009162116 6		
V. FACILITY DRAWING		
All existing facilities must include in the space provided on	page 5 a scale drawing of the facility (see instructions for n	nore detail).
VI. PHOTOGRAPHS		
All existing facilities must include photographs (aei	rial or ground—level) that clearly delineate all existing	g structures; existing storage,
treatment and disposal areas; and sites of future sto	orage, treatment or disposal areas (see instructions fo	r more detail).
VII. FACILITY GEOGRAPHIC LOCATION		
LATITUDE (degrees, minutes, & second	s) LONGITUDE (de	grees, minutes, & seconds)
2 7 1 / 6 1 1 1	1 2 2	1 5
48 68 87 88 48 - 71	72 - 74	73 74 77 - 79
VIII. FACILITY OWNER		
A. If the facility owner is also the facility operator as skip to Section IX below.	listed in Section VIII on Form 1, "General Information", p	place an "X" in the box to the left and
B. If the facility owner is not the facility operator as	listed in Section VIII on Form 1, complete the following in	tems:
1. NAME OF FAC	LITY'S LEGAL OWNER	2. PHONE NO. (area code & no.)
£		203-552-500
E AMERICAN CAN PACKAGING INC.		33 56 - 58 59 - 61 62 - 65
3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST. 6. ZIP CODE
F AMERICAN LANE, P.O. BOX 2600	G GREENWICH	CT 06836-260
AMERICAN LANE, P.O. BOX 2600	41 IIII	40 41 42 47 - 41
IX. OWNER CERTIFICATION		
	examined and am familiar with the information su	
	individuals immediately responsible for obtaining the ete. I am aware that there are significant penalties fo	
including the possibility of fine and imprisonment.	ete. I am aware that there are significant penalties it	in submitting raise information,
A. NAME (print or type)	Ta echarups	C. DATE SIGNED
Jack F. Hildner	1/9/1/02	C. SAIL SIGNES
Vice President	I had a land	10 27 06
X, OPERATOR CERTIFICATION	47-0-14-010-	10-27-86
	John mined and am familiar with the information	hmitted in this and all attached
documents, and that based on my inquiry of those	dekamined and am familiar with the information su individuals immediately responsible for obtaining th	omitted in this and all attached be information. I believe that the
	ete. I am aware that there are significant penalties for	
including the possibility of fine and imprisonment.		





(fill—in areas are spaced for elite type, i.e., 12 charact inch.				Form Approved OMB No. 1	od-RO	175	20 10 1934
FURM 1				ATION . EPA I.D. NUMBER			T/A C
Colored Colore	nsolid	la ted	Permits P		2.	1	3 D
LABEL ITEMS		7	///	GENERAL INSTR			ed, affix
I. EPA I.D. NUMBER		/	///	it in the designated space, ation carefully; if any of it	Revie	w the	inform-
HIL FACILITY NAME		//	///	through it and enter the appropriate fill—in area bel	correc	t det	a in the
FACILITY				the preprinted data is abse	nt <i>(th</i>	e are	a to the
V. MAILING ADDRESS PLA	CĘ	ĹĄ	BEF IM	THIS SPACE that should appear), please proper fill-in area(s) below	prov	ride l	t in the
, / / / / / / / / / / / / / / / / / / /	/	\setminus	//	complete and correct, you terms I, III, V, and VI (need	not (omplete
VI FACILITY	//	\setminus	///	must be completed regard	less).	Com	plete all
VI-LOCATION	//	//	///	items if no label has been the instructions for detations and for the legal at which this data is collected.	iled	item	descrip-
///////////////////////////////////////	/)	/)	///	which this data is collected.	i, W	i jak	
II. POLLUTANT CHARACTERISTICS		j 14.		The Control of the Co			term part
questions, you must submit this form and the supplement	al fo	m li	sted in the	submit any permit application forms to the EPA. If you and parenthesis following the question. Mark "X" in the box in	the th	ird c	olumn
if the supplemental form is attached. If you answer "no" is excluded from permit requirements: see Section C of the	to ea	ech quetio	uestion, y ns. See als	ou need not submit any of these forms. You may answer "no o, Section D of the instructions for definitions of bold—faced	term	our a	tivity
SPECIFIC QUESTIONS	(1) P	MAR	K 'X'	SPECIFIC QUESTIONS	YES		K'X'
A. Is this facility a publicly owned treatment works	ves	NO	ATTACHED	B. Does or will this facility (either existing or proposed)	7 2 3	-	ATTACHE
which results in a discharge to waters of the U.S.?		х		Include a concentrated animal feeding operation or aquatic enimal production facility which results in a		y	
(FORM 2A)	14	12	10	discharge to waters of the U.S.? (FORM 2B) D. Is this a proposed facility (other than those described)	19	20	21.
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in	Х			in A or B above) which will result in a discharge to		X	
A or 8 above? (FORM 2C) E. Does or will this facility treat, store, or dispose of	22	23	24.00	waters of the U.S.? (FORM 2D) F. Do you or will you inject at this facility industrial or	25	24	И
hazardous wastes? (FORM 3)	Х		х	municipal effluent below the lowermost stratum con- taining, within one quarter mile of the well bore,		X	
G. Do you or will you inject at this facility any produced	24	10	30	underground sources of drinking water? (FORM 4)	31	32	***
water or other fluids which are brought to the surface in connection with conventional oil or natural gas pro-				H. Do you or will you inject at this facility fluids for spe- cial processes such as mining of sulfur by the Frasch	1		
duction, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid		х		process, solution mining of minerals, in situ combus- tion of fossil fuel, or recovery of geothermal energy?		X	
hydrocarbons? (FORM 4) I. Is this facility a proposed stationary source which is	34	39	36	(FORM 4) J. is this facility a proposed stationary source which is	37	38	300
one of the 28 industrial categories listed in the in- structions and which will potentially emit 100 tons				NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons.		x	
per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an		х	1	per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment			
attainment area? (FORM 5)	40	41	42	area? (FORM 5)	43	44	45
III. NAME OF FACILITY		-	1 -1 -1		1	5	/ HAR
A. M. E. R. I. C. A. N. C. A. N. C.O.	M. I	P.A	N.Y.		69		
IV. FACILITY CONTACT							is sorry.
		4444		S SUSSE (avec code & no.)	_		
A. NAME & TITLE (last, fir	<u> </u>	1	1 1	B. PHONE (area code & no.)			
A. NAME & TITLE (last, fir	E N	_	INE	ERING 415 536 2400			
A. NAME & TITLE (last, fine) 2 E C K M A N D I C K S U P T 13 14 V. FACILITY MAILING ADDRESS	EN	√G	1 1	ERING 4155362400			
A. NAME & TITLE (last, fl) 2 E C K M A N D I C K S U P T 13 16 V. FACILITY MAILING ADDRESS A. STREET OR P.O.	E I	√ G	INE	ERING 4155362400			
A. NAME & TITLE (last, fl) 2 E C K M A N D I C K S U P T V. FACILITY MAILING ADDRESS A. STREET OR P.O.	EN	√ G	INE	ERING 4155362400			
A. NAME & TITLE (last, fl) 2 E C K M A N D I C K S U P T V. FACILITY MAILING ADDRESS A. STREET OR P.O. 3 3 8 0 1 E A S T 8 t h S T R	E I	√ G	INE	ERING 4155362400			
A. NAME & TITLE (last, fine) C. E. C. K. M. A. N. D. I. C. K. S. U. P. T. 13. 14 V. FACILITY MAILING ADDRESS A. STREET OR P.O. C. 3. 3. 8. 0. 1. E. A. S. T. 8. t. h. S. T. R. B. CITY OR TOWN C. 4. 0. A. K. L. A. N. D.	E I	√ G	INE	ERING 41555362400			
A. NAME & TITLE (last, fine) 2 E C K M A N D I C K S U P T 19 14 V. FACILITY MAILING ADDRESS A. STREET OR P.O. 2 3 3 8 0 1 E A S T 8 t h S T R B. CITY OR TOWN	E I	√ G	INE	ERING 4155362400			
A. NAME & TITLE (last, fine) C. E. C. K. M. A. N. D. I. C. K. S. U. P. T. 13. 14 V. FACILITY MAILING ADDRESS A. STREET OR P.O. C. 3. 3. 8. 0. 1. E. A. S. T. 8. t. h. S. T. R. B. CITY OR TOWN C. 4. 0. A. K. L. A. N. D. 15. 14 VI. FACILITY LOCATION A. STREET, ROUTE NO. OR OTHER S.	E N E H	N G	I N E	ERING 41555362400			
A. NAME & TITLE (last, fine) C. D. E. C. K. M. A. N. D. I. C. K. S. U. P. T. 13. 14. V. FACILITY MAILING ADDRESS A. STREET OR P.O. C. 3 3 8 0 1 E. A. S. T. 8 t. h. S. T. R. S. CITY OR TOWN G. D. A. K. L. A. N. D. 15. 16. VI. FACILITY LOCATION A. STREET, ROUTE NO. OR OTHER S. C. 5 3 8 0 1 E. A. S. T. 8 t. h. S. T. R. 15. 16. 16. 17. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18	E N E H	N G	I N E	ERING 41555362400			
A. NAME & TITLE (last, fine) C. E. C. K. M. A. N. D. I. C. K. S. U. P. T. 13. 14 V. FACILITY MAILING ADDRESS A. STREET OR P.O. C. 3 3 8 0 1 E. A. S. T. 8 t. h. S. T. R. B. CITY OR TOWN C. 4 0 A. K. L. A. N. D. 15. 16 VI. FACILITY LOCATION A. STREET, ROUTE NO. OR OTHER S. C. 5 3 8 0 1 E. A. S. T. 8 t. h. S. T. R. B. COUNTY NAME	E N E H	N G	I N E	ERING 41555362400			
A. NAME & TITLE (last, fl) C 2 E C K M A N D I C K S U P T 13 14 V. FACILITY MAILING ADDRESS A. STREET OR P.O. C 3 3 8 0 1 E A S T 8 t h S T R B. CITY OR TOWN 4 0 A K L A N D 15 16 VI. FACILITY LOCATION A. STREET, ROUTE NO. OR OTHER S C 5 3 8 0 1 E A S T 8 t h S T R	E N E H	N G	I N E	ERING 41555362400			
A. NAME & TITLE (last, fine) C. E. C. K. M. A. N. D. I. C. K. S. U. P. T. D. 18 V. FACILITY MAILING ADDRESS A. STREET OR P.O. C. 3 3 8 0 1 E. A. S. T. 8 t. h. S. T. R. B. CITY OR TOWN C. 4 0 A. K. L. A. N. D. S. VI. FACILITY LOCATION A. STREET, ROUTE NO. OR OTHER S. C. 5 3 8 0 1 E. A. S. T. 8 t. h. S. T. R. B. COUNTY NAME A. L. A. M. E. D. A. B. COUNTY NAME A. L. A. M. E. D. A.	E N E H	N G	I N E	ERING 41555362400			

CONTINUED FROM THE FRONT					*
VII. SIC CODES (4-digit, in order of priority)					The state of the s
A. FIRST	A		1000	SECOND	43
7 3 4 1 1 (specify) Metal Can Manufac	ture	7	(specify)		
C. THIRD				FOURTH	
(specify)		7	(specify)		
VIII. OPERATOR INFORMATION	to the Warrensen	15 16 - 19		والمراجع والمراجع والمراجع والمراجع	
	ANNAME		Marine Careful		B, is the name listed in
					Item VIII-A also th
8 A. M. E. R. I. C. A. N C. A. N C. O	M, P, A, N, Y,		99 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		YES D NO
C. STATUS OF OPERATOR (Enter the appro F = FEDERAL M = PUBLIC (other than fe S = STATE O = OTHER (specify) P = PRIVATE		er box; if "Other", pecify)	specify.)	2 0 3 5	5 2 2 1 8 1
E. STREET OR	P.O. BOX			en de la companya de	Control Section Control
AMERICANLN1B9ENV	I,R,O,N,M,E,N,T	'.A.L.D.E.P.		Harmonia de la composición del composición de la composición de la composición del composición de la composición del composición de la composición del com	The state of the s
F. CITY OR TOWN		G.STATE	H. ZIP CODE IX.	INDIAN LAND	anggara samanatan salah mendang mengahan panggarangkan panggarang
BGREENWICH		C.T		the facility located	on Indian lands?
15 16 1 18 18 18 18 18 18 18 18 18 18 18 18 1		1 1 1 1 1 1 1 1 1 1	0, 6, 8, 3, 0	52	
X. EXISTING ENVIRONMENTAL PERMITS				A STATE OF THE STA	
A. NPDES (Discharges to Surface Water)	D. PSD (Alr Emission	s from Proposed So	urces)		
9 N C A O O O 6 0 3 3	9 P				
B. UIC (Underground Injection of Fluids)	15 16 17 116 E. OTHE	R (specify)	30 J		
			(specify)		
9 U 11 12 13 13 14 15 15 15 15 15 15 15	9 10 10 17 10		30		•
C. RCRA (Hazardous Wastes)	· 존대의 - 이 제 경기 교기 및 기계	R (specify)	4.5元 自己的 位		
9 R	9		(specify)		
	18 16 17 19		30		
Attach to t n a topographic map	of the area extending t	o at least one mi	e beyond propert	ty bounderies. The	he map must show
the outline of the facility, the location of ea treatment, storage, or disposal facilities, and water bodies in the map area. See instructions	ch of its existing and peach well where it inju	proposed intake a ects fluids under	and discharge stru	ctures, each of i	ts hazardous waste
	August 1975 Committee Comm	D.			A STATE OF THE STA
XII. NATURE OF BUSINESS (provide a brief descrip	tion)				
Manufacture of me	tal cans and en	ds - sheari	ng, coating	and printin	.g
of sheeted tin pl	ate.			-	
XIII. CERTIFICATION (see instructions)		4			
I certify under penalty of law that I have per	rsonally examined and	am familiar with	the information s	uhmitted in this	annlication and all
attachments and that, based on my inquiry	of those persons imm	nediately respons	ible for obtaining	a the informatio	n contained in the
application, I believe that the information is false information, including the possibility of	true, accurate and cor fine and imprisonment	mplete. I am awa	re that there are	significant pena	ities for submitting
A. NAME & OFFICIAL TITLE (type or print)	B. SIGNA	TURE (C. 0	DATE SIGNED
Louis F. Heeb, Vice President Corporate Environmental Program	ns to	in 7	. / Sut		11-14-80
COMMENTS FOR OFFICIAL USE ONLY					The state of the s
G C					
15 16 DA Form 2510 1 (6 20)					ज ।
PA Form 3510-1 (6-80) REVERSE					

Continued	from	the	front

	an a concept		September 1 August		
Ш.	. PROCESSES	(continued)		1.7	

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

- A. EPA HAZARDOUS WASTE NUMBER Enter the four—digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle, if you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four—digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.
- B. ESTIMATED ANNUAL QUANTITY For each listed waste entered in column A estimate the quantity of thet waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non—listed waste/s/ that will be handled which possess that characteristic or contaminant.
- C. UNIT OF MEASURE For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CODE		METRIC UNIT OF MEASURE	CODE
POUNDSP		KILOGRAMS	K
TONS		METRIC TONS	М

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste antered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hezardous wastes that can be described by

- Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual
 quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- 2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
- 3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non—listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

	A. EPA		C. UNIT					D. PROCESSES
LINE NO.	HAZARD WASTEN (enter code	QUANTITY OF WASTE	OF MEA SURE (enter code)			SS CODES ter)	•	2. PROCESS DESCRIPTION (if a code is not entered in $D(1)$)
X-i	K 0 5	900	P	T 0 3	D 8 0	1 1	1 1	
X-2	D 0 0	400	P	T = 0	D 8 0		T-T-	
X- 3	$D \mid 0 \mid 0 \mid$	100	P	T 0 3	D 8 0		1 1	
X-4	$D \mid 0 \mid 0 \mid$?						included with above

	Pho	oto	opy	/ th	is page before completir. /ou		mo	re t	than	26	was	stes t	to lis					_	Form Approved OMB No. 158-S80004
w C	A	و ر		ÿM Ç≱	9 / 62 / / 6 1		/	\	s W	2				DU			AL US		T/A 5 D U P
	DES	CR	IP'	ric	N OF HAZARDOUS WASTI			ıtin			Ne v	, ny ago , u e re	Ak 1-4		di da	پرهامور بدا پ			D. PROCESSES
LINE NO.	i H	AZ	EPA ARI EN	D.	B. ESTIMATED ANNUAL QUANTITY OF WASTE	5	UN ME UR ente	E	7	=	1	. PR	OCE (en	:SS (:00	ES	5		2. PROCESS DESCRIPTION (if a code is not entered in D(1))
	23.			26			36		27	. 1		27	29	27	- 1	29	27 -	29	
2	D	0	0	1	27,000	-	P		S	0,	4	-	-	+-		+			
		_		\dashv				·	 		+		1	 		\dashv	-T	_	
3									-	-	+	1	1	-	1	+	-	_	
4		_		_		-		_	 		+	T		 	- 1	\dashv		,	
5	-	-				-				г т	-	-	1	 		+	1	1	
6.	-			_		-	_	_	_					 	ı				
7	L	-				_	_				-		1	<u> </u>				,	
8	_					ļ			_	1 1	_			<u> </u>	г	_			· ·
9	_									 1				\perp				_	
10						1						· 		L					
11													<u>'</u>		' '				
12										1 1		'	'				'	'	
13										11		ı			1		•	1	
14			Γ							1 1			1		ī		T		·
15						1				1		1	T		1			1	
16	T					T				T-1		T	1		 1			Т-	
17						1				1 7	,	1		T	1			ī	
18	1					1		T		 1	-	1	1		11		Т	Т	webs
19				-						1	-	1	· T	_	1		 1	1	
20						+				1		7	1	+	 		1	T	
21			-	-						1	-	T	-T-	\dagger	1		T	Τ	
22	1			-			\vdash		T	1	-	T	1		T 1			Τ-	
23						-		-		1	,	r			1		· · ·	T	7104
24	\dagger	-	-	-		+		-	-	1	1	Т		+	1			T	
25	+		-	-		+	-	-		1	1	ī		+	1 1		1	1	
26	+			-		+	-	-	-	1	1	1	1	+	1	-	-	_	
<u> </u>	23		510		 127 - 39 (6-80)	1	36	<u>_</u>	27		29	27	- 29	27		29	27 -	29	CONTINUE ON REVERSE

Continued from the front.			
IV. DESCRIPTION OF HAZARDOUS WASTES	inued)	the first of the second of the	
E. USE THIS SPACE TO LIST ADDITIONAL PRO	CESS CODES FROM	ITEM D(1) ON PAGE 3.	
	,		
EPA I.D. NO. (enter from page 1)			
F 6			
1 2 - 13 14 15			
V. FACILITY DRAWING			
All existing facilities must include in the space provided or	n page 5 a scale drawing o	of the facility (see instruction	\$ for more detail).
VI. PHOTOGRAPHS			
All existing facilities must include photographs (ae	rial or ground—level) t	that clearly delineate all e	xisting structures; existing storage,
I treatment and disposal areas: and sites of future st	arago troatmont ar dic	enneal areas lega instruction	ons for more detaill
treatment and disposal areas; and sites of future sto	orage, treatment or dis	sposal areas <i>(see instructio</i>	ons for more detail).
VII. FACILITY GEOGRAPHIC LOCATION			
			ons for more detail). DE (degrees, minutes, & seconds)
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second			2 2 1 5
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 67 68 69 71			
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 65 66 67 60 69 71	is)	LONGITUD	DE (degrees, minutes, & seconds) 2 2 1 5 74 75 76 777 - 79
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 67 68 69 71	is)	LONGITUD	DE (degrees, minutes, & seconds) 2 2 1 5 74 75 76 777 - 79
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 65 65 71 VIII. FACILITY OWNER A. If the facility owner is also the facility operator as skip to Section IX below.	s listed in Section VIII on	LONGITUD 1 72 1 Form 1, "General Informati	DE (degrees, minutes, & seconds) 2 2 1 5 75 76 777 79 ion", place an "X" in the box to the left and
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 4 0 55 56 67 69 69 71 VIII. FACILITY OWNER A. If the facility owner is also the facility operator as	s listed in Section VIII on	LONGITUD 1 72 1 Form 1, "General Informati	DE (degrees, minutes, & seconds) 2 2 1 5 75 76 777 79 ion", place an "X" in the box to the left and
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 57 68 69 - 71 VIII. FACILITY OWNER A. If the facility owner is also the facility operator as skip to Section IX below. B. If the facility owner is not the facility operator as	s listed in Section VIII on	LONGITUD 1 72 Form 1, "General Information Form 1, complete the follow	DE (degrees, minutes, & seconds) 2 2 1 5 75 76 777 79 ion", place an "X" in the box to the left and
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 57 68 69 71 VIII. FACILITY OWNER A. If the facility owner is also the facility operator as skip to Section IX below. B. If the facility owner is not the facility operator as 1. NAME OF FAC	s listed in Section VIII on	LONGITUD 1 72 Form 1, "General Information Form 1, complete the follow	DE (degrees, minutes, & seconds) 2 2 1 5 75 76 777 - 79 ion", place an "X" in the box to the left and wing items:
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 57 68 69 - 71 VIII. FACILITY OWNER A. If the facility owner is also the facility operator as skip to Section IX below. B. If the facility owner is not the facility operator as	s listed in Section VIII on	LONGITUD 1 72 Form 1, "General Information Form 1, complete the follow	DE (degrees, minutes, & seconds) 2 2 1 5 75 76 777 - 79 ion", place an "X" in the box to the left and wing items:
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 5 6 6 7 6 6 6 7 6 7 6 7 6 7 6 7 6 7 6 7	s listed in Section VIII on slisted in Section V	LONGITUD 1 72 Form 1, "General Information Form 1, complete the follow	ion", place an "X" in the box to the left and wing items:
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 57 65 65 - 71 VIII. FACILITY OWNER A. If the facility owner is also the facility operator as skip to Section IX below. B. If the facility owner is not the facility operator as 1. NAME OF FACE E 13 15 3. STREET OR P.O. BOX	s listed in Section VIII on slisted in Section VIII on ILITY'S LEGAL OWNER	Form 1, "General Informati	ion", place an "X" in the box to the left and wing items:
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 5 6 6 7 6 6 6 7 1 1 1 1 1 1 1 1 1 1 1 1 1	s listed in Section VIII on slisted in Section V	Form 1, "General Informati	ion", place an "X" in the box to the left and wing items:
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 67 68 68 - 71 VIII. FACILITY OWNER A. If the facility owner is also the facility operator as skip to Section IX below. B. If the facility owner is not the facility operator as 1. NAME OF FACE E 13 19 3. STREET OR P.O. BOX C F 13 16 IX. OWNER CERTIFICATION	s listed in Section VIII on slisted in Section VIII on ILLITY'S LEGAL OWNER	Form 1, "General Information Form 1, complete the follows: 4. CITY OR TOWN	2 2 1 5 75 76 77 - 79 ion", place an "X" in the box to the left and wing items: 2. PHONE NO. (area code & no 5. ST. 6. ZIP CODE
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 57 68 68 - 71 VIII. FACILITY OWNER A. If the facility owner is also the facility operator as skip to Section IX below. B. If the facility owner is not the facility operator as 1. NAME OF FACE E 15 16 1X. OWNER CERTIFICATION I certify under penalty of law that I have personally	s listed in Section VIII on slisted in Section VIII on ILLITY'S LEGAL OWNER	Form 1, "General Information Form 1, complete the following at the second secon	ion", place an "X" in the box to the left and wing items: 2. PHONE NO. (area code & no 5. ST. 6. ZIP CODE 40 41 42 47 - 51
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 57 68 68 - 71 VIII. FACILITY OWNER A. If the facility owner is also the facility operator as skip to Section IX below. B. If the facility owner is not the facility operator as 1. NAME OF FACE E 15 16 1X. OWNER CERTIFICATION I certify under penalty of law that I have personally documents, and that based on my inquiry of those	s listed in Section VIII on slisted in Section V	Form 1, "General Information Form 1, complete the following and the state of the s	ion", place an "X" in the box to the left and wing items: 2. PHONE NO. (area code & no 5. ST. 6. ZIP CODE 40 41 42 47 - 51 on submitted in this and all attached ing the information, I believe that the
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 57 68 69 71 VIII. FACILITY OWNER A. If the facility owner is also the facility operator as skip to Section IX below. B. If the facility owner is not the facility operator as 1. NAME OF FACE 1. NAME OF FACE IS 18 IX. OWNER CERTIFICATION I certify under penalty of law that I have personally documents, and that based on my inquiry of those submitted information is true, accurate, and complete	s listed in Section VIII on sisted in Section VIII on ILLITY'S LEGAL OWNER Grant of the section VIII on ILLITY'S LEGAL OWNER Grant of the section VIII on ILLITY'S LEGAL OWNER Grant of the section VIII on ILLITY'S LEGAL OWNER Grant of the section VIII on ILLITY'S LEGAL OWNER Grant of the section VIII on Illinois Illin	Form 1, "General Information Form 1, complete the following and the state of the s	ion", place an "X" in the box to the left and wing items: 2. PHONE NO. (area code & no 5. ST. 6. ZIP CODE 40 41 42 47 - 51 on submitted in this and all attached ing the information, I believe that the
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 65 66 67 60 65 71 VIII. FACILITY OWNER A. If the facility owner is also the facility operator as skip to Section IX below. B. If the facility owner is not the facility operator as 1. NAME OF FACE E 13 19 3. STREET OR P.O. BOX C F IX. OWNER CERTIFICATION I certify under penalty of law that I have personally documents, and that based on my inquiry of those submitted information is true, accurate, and compilincluding the possibility of fine and imprisonment.	s listed in Section VIII on slisted in Section VIII on ILITY'S LEGAL OWNER GOVERNMENT OF THE SECTION OF THE SEC	Form 1, "General Information Form 1, complete the following and the state of the s	ion", place an "X" in the box to the left and wing items: 2. PHONE NO. (area code & no 53 55 55 55. 6. ZIP CODE 40 41 42 47 - 51 on submitted in this and all attached ing the information, I believe that the ties for submitting false information,
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 5 65 65 7 65 65 7 7 7 7 7 7 7 7 7 7 7 7	s listed in Section VIII on sisted in Section VIII on ILLITY'S LEGAL OWNER Grant of the section VIII on ILLITY'S LEGAL OWNER Grant of the section VIII on ILLITY'S LEGAL OWNER Grant of the section VIII on ILLITY'S LEGAL OWNER Grant of the section VIII on ILLITY'S LEGAL OWNER Grant of the section VIII on Illinois Illin	Form 1, "General Information Form 1, complete the following and the state of the s	ion", place an "X" in the box to the left and wing items: 2. PHONE NO. (area code & no 5. ST. 6. ZIP CODE 40 41 42 47 - 51 on submitted in this and all attached ing the information, I believe that the ties for submitting false information, C. DATE SIGNED
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 65 66 67 60 67 60 69 71 VIII. FACILITY OWNER A. If the facility owner is also the facility operator as skip to Section IX below. B. If the facility owner is not the facility operator as 1. NAME OF FACE E IS 119 3. STREET OR P.O. BOX C F IX. OWNER CERTIFICATION I certify under penalty of law that I have personally documents, and that based on my inquiry of those submitted information is true, accurate, and compliance including the possibility of fine and imprisonment. A. NAME (print or type) Louis F. Heeb, Vice President	s listed in Section VIII on slisted in Section VIII on ILITY'S LEGAL OWNER GOVERNMENT OF THE SECTION OF THE SEC	Form 1, "General Information Form 1, complete the following and the state of the s	ion", place an "X" in the box to the left and wing items: 2. PHONE NO. (area code & no 53 55 55 55. 6. ZIP CODE 40 41 42 47 - 51 on submitted in this and all attached ing the information, I believe that the ties for submitting false information,
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 57 68 69 71 VIII. FACILITY OWNER A. If the facility owner is also the facility operator as skip to Section IX below. B. If the facility owner is not the facility operator as 1. NAME OF FACE E IS 18 3. STREET OR P.O. BOX C F IS 18 IX. OWNER CERTIFICATION I certify under penalty of law that I have personally documents, and that based on my inquiry of those submitted information is true, accurate, and compliance including the possibility of fine and imprisonment. A. NAME (print or type) Louis F. Heeb, Vice President Corporate Environmental Programs	s listed in Section VIII on slisted in Section VIII on ILITY'S LEGAL OWNER GOVERNMENT OF THE SECTION OF THE SEC	Form 1, "General Information Form 1, complete the following and the state of the s	ion", place an "X" in the box to the left and wing items: 2. PHONE NO. (area code & no 5. ST. 6. ZIP CODE 40 41 42 47 - 51 on submitted in this and all attached ing the information, I believe that the ties for submitting false information, C. DATE SIGNED
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 65 66 67 60 67 60 69 71 VIII. FACILITY OWNER A. If the facility owner is also the facility operator as skip to Section IX below. B. If the facility owner is not the facility operator as 1. NAME OF FACE E IS 118 3. STREET OR P.O. BOX C F IS 118 IX. OWNER CERTIFICATION I certify under penalty of law that I have personally documents, and that based on my inquiry of those submitted information is true, accurate, and compliance including the possibility of fine and imprisonment. A. NAME (print or type) Louis F. Heeb, Vice President Corporate Environmental Programs X. OPERATOR CERTIFICATION	s listed in Section VIII on slisted in Section VIII on ILITY'S LEGAL OWNER Grant Control of the section VIII on Itality's LEGAL owner of the section VIII on	Form 1, "General Information Form 1, complete the following and the second seco	ion", place an "X" in the box to the left and wing items: 2. PHONE NO. (area code & no submitted in this and all attached ing the information, I believe that the ties for submitting false information, C. DATE SIGNED 1 - 14 - 50
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 5 66 67 60 67 60 67 60 69 71 VIII. FACILITY OWNER A. If the facility owner is also the facility operator as skip to Section IX below. B. If the facility owner is not the facility operator as 1. NAME OF FACE E IS 18 3. STREET OR P.O. BOX C F IS 18 IX. OWNER CERTIFICATION I certify under penalty of law that I have personally documents, and that based on my inquiry of those submitted information is true, accurate, and compliance including the possibility of fine and imprisonment. A. NAME (print or type) Louis F. Heeb, Vice President Corporate Environmental Programs X. OPERATOR CERTIFICATION I certify under penalty of law that I have personally certify under penalty of law that I have personally	s listed in Section VIII on slisted in Section VIII on ILLITY'S LEGAL OWNER of Grand and am factorious immediates and aware that the section of the section VIII on ILLITY'S LEGAL OWNER of Grand and am factorious immediates and am factorious immediates of the section of the se	Form 1, "General Information Form 1, complete the following and the service of th	ion", place an "X" in the box to the left and wing items: 2. PHONE NO. (area code & no submitted in this and all attached ing the information, I believe that the ties for submitted in this and all attached in submitted in this and all attached
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 5 65 65 7 65 65 7 7 65 65 7 7 7 7 7 7 7	s listed in Section VIII on silisted in Section VIII on ILLITY'S LEGAL OWNER of Grand and am faindividuals immediate lete. I am aware that the siling of the	Form 1, "General Information Form 1, complete the following 4. CITY OR TOWN miliar with the information there are significant penalty and the information of the i	ion", place an "X" in the box to the left and wing items: 2. PHONE NO. (area code & no submitted in this and all attached ing the information, I believe that the ties for submitted in this and all attached ing the information, I believe that the ties for submitted in this and all attached ing the information, I believe that the ties for submitted in this and all attached ing the information, I believe that the
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 5 66 67 60 67 60 67 60 69 71 VIII. FACILITY OWNER A. If the facility owner is also the facility operator as skip to Section IX below. B. If the facility owner is not the facility operator as 1. NAME OF FACE E IS 18 3. STREET OR P.O. BOX C F IS 18 IX. OWNER CERTIFICATION I certify under penalty of law that I have personally documents, and that based on my inquiry of those submitted information is true, accurate, and compliance including the possibility of fine and imprisonment. A. NAME (print or type) Louis F. Heeb, Vice President Corporate Environmental Programs X. OPERATOR CERTIFICATION I certify under penalty of law that I have personally certify under penalty of law that I have personally	s listed in Section VIII on silisted in Section VIII on ILLITY'S LEGAL OWNER of Grand and am faindividuals immediate lete. I am aware that the sindividuals immediate lete. I am aware that the lete.	Form 1, "General Information Form 1, complete the following 4. CITY OR TOWN miliar with the information there are significant penalty and the information of the i	ion", place an "X" in the box to the left and wing items: 2. PHONE NO. (area code & no submitted in this and all attached ing the information, I believe that the ties for submitted in this and all attached ing the information, I believe that the ties for submitted in this and all attached ing the information, I believe that the ties for submitted in this and all attached ing the information, I believe that the
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 5 5 5 5 5 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1	s listed in Section VIII on sisted in Section VIII on ILLITY'S LEGAL OWNER of Grand and am facindividuals immediate lete. I am aware that the sindividuals immediate lete.	Form 1, "General Information Form 1, complete the following 4. CITY OR TOWN miliar with the information there are significant penalty and the information of the i	ion", place an "X" in the box to the left and wing items: 2. PHONE NO. (area code & no 53 55 55 55 6. ZIP CODE 5. ST. 6. ZIP CODE on submitted in this and all attached ing the information, I believe that the ties for submitting false information, I believe that the ties for submitting false information, I believe that the ties for submitting false information, I believe that the ties for submitting false information, I believe that the ties for submitting false information,
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 2 7 4 0 5 65 65 7 65 65 7 7 65 65 7 7 7 7 7 7 7	s listed in Section VIII on silisted in Section VIII on ILLITY'S LEGAL OWNER of Grand and am faindividuals immediate lete. I am aware that the sindividuals immediate lete. I am aware that the lete.	Form 1, "General Information Form 1, complete the following 4. CITY OR TOWN miliar with the information there are significant penalty and the information of the i	ion", place an "X" in the box to the left and wing items: 2. PHONE NO. (area code & no submitted in this and all attached ing the information, I believe that the ties for submitted in this and all attached ing the information, I believe that the ties for submitted in this and all attached ing the information, I believe that the ties for submitted in this and all attached ing the information, I believe that the

	.4	
PART A RATING SHEET FACILITY NAME:	Amaensio Cai	W Company
EPA I.D. #: $CAOOO1/62/162/16$ COUNTY: $OO1$ SCORE: PROCESS: $OO1$	025	/ /
PROCESS: 201	<i>-</i>	
		-
SCORE = POINTS X WEIGHTING FACTOR	WEIGHTING	SCORE
0 = Non Hazardous 99 = Imminent Hazard	FACTOR	
AGE OF FACILITY (YEARS)		, /
0 - 10 11 - 20 21 - 30 (ver 30) 1 pt. 2 pt. 3 pt. (4 pt.)	1	7
PROCESS DESIGN CAPACITY (GAL.)		
1 - 1k 1k - 10k 10k - 100k 100k - 500k over 500k 1 pt. 2 pt. 3 pt. 4 pt. 5 pt.	2	6
PROCESS (pick worst case, add 1 point if any additional processes, then multiply by weighing factor)		·
5 pt landfill (D80) disposal in surface impoundments (D83) injection wells (D79)		
4 pt treatment in surface impoundments (TO2) storage in surface impoundments (SO4)	3	3
3 pt land application (D81)		
underground tanks (SO2) storage in piles (SO3)		
2 pt treatment in tanks or containers (TO1) incineration (TO3)		
1 pt storage in tanks or containers (SO1, SO2)		
CHARACTER OF WASTE		_
1 pt hazardous (D,F,K,U) - 7000/ 2 pt D005 - D015, D017, U021, U043, U117, U133 - U135, U223, U232	4	4
3 pt acutely hazardous (P)		,
LOCATION OF FACILITY		7
2 pt rural 2 pt urban	1	
BEST ENGINEERING JUDGEMENT		
lower hazard higher hazard	`3	0

1 2 3 4 5

RATIONALE FOR BEJ SCORE AND OTHER COMMENTS:

2 for cognitive wastes 2-facility

work Clean

TOTAL SCORE =

Refer to	PHASE ON Indicat your in Interim Regulatory Requirements Yes	e by itials: <u>No</u>	Valid Prmlg Date?
1	T/S/D'Facility? (If No, return to respondent.)		· · · · · · · · ·
3	Form 1 received? Form 3 received?		
1 & 3	Postmarked on or before November 19, 1980?		
3	Date of operation entered?		. •
. 3 .	Date of operation on or before November 19, 1980?		
Notif.	Notifier?		
record	Notified on or before August 18, 1980?		
1	Form 1, XIII B signed? Form 3, IX B Signed?		•
	en items above are initialed in the Yes column, generate Inter gement and indicate the trigger date here:	im Status	S
		im Status	S
	gement and indicate the trigger date here:	im Status	
	ret 5/12 PHASE TWO	im Status	5
	ret 5/12 PHASE TWO Unsure if regulated or non-regulated?	im Status	S
Acknowl ed 1 3	ret 5/12 PHASE TWO Unsure if regulated or non-regulated? New facility?	_\b_} 	5
Acknowl ed 1 3	Unsure if regulated or non-regulated? New facility? Core items missing? If Yes, indicate which items: Facility name; location; mail address; operator in	_\b_} 	
Acknowl ed 1 3	PHASE TWO Unsure if regulated or non-regulated? New facility? Core items missing? If Yes, indicate which items: Facility name; location; mail address; operator in certification; process info; waste info process;		
Acknowled 1 3 1 & 3	PHASE THREE PHASE TWO Unsure if regulated or non-regulated? New facility? Core items missing? If Yes, indicate which items: Facility name; location; mail address; operator in certification; process info; waste info process; PHASE THREE		

Log out/Log in on reverse side.

MAINTENANCE SCREEN SELECTION MENU

ZHTER OPTION: **

C1 : CARD C1 - PROCESS CODE / AMOUNT / UNIT

PC : CARD PC - FACILITY COMMENTS

P2 : CARD P2 - PACILITY NAME / INDICATORS / PREE PIELDS

P7 : CARD P7 - SITE INDUSTRIAL CLASSIFICATION CODES

P9 : CARD P9 - PERMIT TYPE AND PERMIT MUMBER

W1 : CARD W1 - MAZARDOUS WASTE CODE / AMOUNT / UNIT

W2 : CARD W2 - MAZARDOUS WASTE CODE AND PROCESS

OT : CARD OT - P1 / P6 / P8 / P9 / PO /ALIAS MAINTENANCE EX : EXIT MAINTENANCE MENU SCREEN BACK TO MAIN MENU

MAINTENANCE SCREEN CARD F2

PACILITY ID: -----

PACILITY CONTACT NAME/POSITION : -----CONTACT TELEPHONE MUMBER : (---) --- ----

MODIFICATION UNDER CONSTRUCTION: -

COMMERCIAL FACILITY INDICATOR: -MON - REG. PACILITY INDICATOR: -

REGION PLAG

REGIONAL ELEMENTS 1: -

PINANCIAL TICKER: ----

STATE AUTH. INDICATOR: -

PACILITTY ID:	Ć.	NANCE SCREE ARD W1	Standard Barrier	the codes under the the side under under the side under the the the codes under the the there then.	
INDEX	WASTE CODE	WASTE CODE	WASTE Amount	MASTE UNIT	
		0000	*********	:	

MAINTENANCE SCREEN CARD P1 / P6 / P8 / P9 / P0 / ALIAS

PACILITY ID: CAD 009162116

(F1) MOTIF. COMPIDENTIALITY: - PART-A COMPIDENTIALITY: - CLOSURE DATE :	(P9) MAP INDICATOR # - MATURE OF BUSINESS : -
(P6) DISTRICT CODE :	(PO) MOTIP. ACKNOW DATE : INTERIM STATUS DATE :

INTERIN STATUS DATE 2 :

(F8) OWNER TYPE ACRA PERMIT STATUS : -

(AL) ALIAS MANE : -----

Change Data Entered

Initials

Date

RCRA NOTIFICATION MAINTENANCE FORM

	FACILITY ID	: CAD 009162 116
(F2)	CONTACT PERSON/TITLE	.
	CONTACT PHONE NUMBER	* <u></u>
(F3)		*
	MAILING CITY	:STATE ZIP
(F8)	HAZ WASTE ACTIVITY	: ENTER "X" FOR ADD/ "\$" FOR DELETE
	ACTIVITY CODE	: GEN TRANS TSD UNC
	TRASPORT MODE	: AIR RAIL HIGHWAY WATER
		OTHER
(OA)	FACILITY OWNER NAME	*
(OT)	C303 CODE	
	C1105 CODE	:5
A DD	: CHANGE :	DELETE:
DATI	E : / / /	INITIAL: (VV

RECORDS SEPARATOR PAGE

Vim (File)



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION IX 75 Hawthorne Street San Francisco, CA 94105-3901

December 7, 1999

OFFICE OF THE REGIONAL ADMINISTRATOR

CERTIFIED MAIL RECEIPT NO. Z 387 950 295 RETURN RECEIPT REQUESTED

In Reply, Refer to WST-3

Mr. John Sneed Vice President and Group Leader The Dai-Chi Kangyo Bank, Ltd. Chicago Branch 10 South Wacker Drive, 26th Floor Chicago, Illinois 60606

Subject:

Termination of Letter of Credit SDC-743-001488

American Can Company, Oakland, California

Dear Mr. Sneed:

On February 13, 1995, the United States Environmental Protection Agency (EPA), Region 9, sent a letter to the American National Can Company authorizing release of Letter of Credit (LOC) SDC-743-001488, dated April 26, 1988 (Enclosure 1). This LOC was issued by your bank to the American National Can Company of Chicago, Illinois, for their facility in Oakland, California (Enclosure 2). The Regional Administrator of EPA Region 9 was listed as the beneficiary.

On April 11, 1995, the California Department of Toxic Substances Control (DTSC) sent a letter to the Dai-Chi Kangyo Bank, Ltd., stating that it was returning the LOC SDC-743-001488 (Enclosure 3). The LOC was being replaced by LOC SDC-743-002816 with DTSC as the beneficiary.

In October of this year, Gary Silha, Director of Treasury Operations, American National Can Company, contacted EPA Region 9. Mr. Silha stated that neither the bank nor American National Can Company ever received the original LOC SDC-743-001488 which was thought to have been included in the April 1995 letter by DTSC to the Dai-chai Kangyo Bank. Mr. Silha stated that the letter had included a photocopy of the LOC and not the original. EPA Region 9 has searched our files and we were unable to locate the original LOC. The DTSC has searched their files and also was not able to locate the original LOC.

Z 387 950 295

US Postal Service Receipt for Certifie Mail No Insurance Coverage Provided. Do not use for International Mail (See reverse)

	DO NOT USE IOI INTERNATION	iai iviali (See levelse)					
	Sent jo John Snel The Sai-Jui s Street & Number Chica 10 South Warker Post Office, State, & ZIP Food Chuca 60	Pongyo Bank III gol Branch Dr. 300					
	Postage	\$					
	Certified Fee						
	Special Delivery Fee						
۵	Restricted Delivery Fee						
April 1995	Return Receipt Showing to Whom & Date Delivered						
, Aprı	Return Receipt Showing to Whom, Date, & Addressee's Address						
200	TOTAL Postage & Fees	\$					
S Form 3800	Postmark or Date						

Therefore, the EPA is again authorizing the release of LOC SDC-743-001488 (Enclosure 1). Since the original LOC has not been located and has been replaced with SDC-743-002816, the EPA authorizes the cancellation of LOC SDC-743-001488. This authorization of cancellation provides clarification that the EPA does not intend to draw on LOC SDC-743-001488.

Furthermore, during the EPA file search, we located an original amendment to LOC SDC-743-001488 dated April 21, 1989. Since the cancellation of LOC SDC-743-001488 is being approved, we are enclosing the original amendment (Enclosure 4) with this letter.

If you have any questions regarding this matter, please contact M. Kim Savage of my staff at (415) 744-2097.

Yours.

forFelicia Marcus

Regional Administrator

enclosures

cc: Sue Laney

Department of Toxic Substances Control 10151 Croydon Way, Suite 3 Sacramento, CA 95827-2106

Marvel Bradshaw Department of Toxic Substances Control 700 Heinz Avenue, Suite 200 Berkeley, CA 94710-2721

Gary Silha
Director of Treasury Operations
American National Can Company
8770 W. Bryn Mawr Avenue - Mail Suite 10-G
Chicago, IL 60631-3542

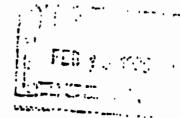


UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION IX

75 Hawthorns Street San Francisco, CA \$4105-3901

FEB 1 3 1995



Mr. Joseph 5. Moran Assistant General Counsel - Environmental American Can Company 8770 West Bryn Mawr Avenue Chicago, Illinois 60631

Re: EPA's Release of Letter of Credit No. 5DC-743-001488

Dear Mr. Moran:

This letter is in response to a request from Deborah McDowell, Financial Responsibility Coordinator, California Department of Toxic Substances Control (DTSC), that the United States Environmental Protection Agency (EPA) authorize the release of letter of credit number SDC-743-001488. This letter of credit was issued on April 26, 1988 by the Dai-Chi Kangyo Bank, Ltd, to provide financial assurance for closure of American Can Packaging, Inc., EPA ID No. CAD D09 162 116, and cites U. S. EPA as beneficiary.

On August 1, 1992. EPA granted final authorization to the State of California, Environmental Protection Agency, DTSC, to operate the State's hazardous waste program, subject to the authority retained by EPA in accordance with the Hazardous and Solid Waste Amendments of 1984 (HSWA) [Federal Register, Vol. 57, No. 143, Thursday, July 23, 1992, pgs. 42726-32730 enclosed].

Thus, RCRA financial responsibility mechanisms required under 40 Code of Federal Regulations 264/265 Subpart H and the California Code of Regulations 66264/66265 Title 22, Article 8, must now be payable to the Department of Toxic Substances Control (Department) rather than to the EPA Regional Administrator.

Accordingly, EPA authorizes the release and return to your office of letter of credit number SDC-743-001488, with the understanding that it shall be immediately replaced with an alternative mechanism of equal or greater value.

LCC submitted 4/26/88

Printed on Recycled Paper

If you have any questions regarding the above, please do not hesitate to call me at (415) 744-2090 or Elaine Schimmel of my staff at (415) 744-2146.

Singly,

Righard E

rd E. Vaille

Chief

Waste Compliance Branch

Enclosure

cc: 'Seborah McDowell, DTSC-HQ16, Sacramento, w/o enc.

おいちにはなべれて、メイナンで、一ついちくらいませいいはなればないできた! 東京とかけスロウムない。AEはNロンロウニメのロスコン・Tipyを立分すた。

etersokatkaskaskaskaskaskast bollu 180af

A CANCESTORNOR TENDER LANGUAGE FOR JANCES LENGES OF THE NOR TO THE TENDER OF THE TENDE

でんだい ごうじょうしゅう はんしょうしゅう くらくそむけん こはんきき どうひゅう てんきひょう ひとさせ はんせん スプリング

ac. vonenconnectorRegional - Administrator באפטעפט אוניים אוניים

enden dan 16 holen da hollen er fra filmen genoorden de korne trak da holle da da holle had kelker prockedkedkediteuxeda sorradkeuxela soladeredixeentolandikelailaalaalaanut.

PHICKEDHEURSCHIENSCHABKOCH PORUNGERABUNGURTUREN WEITEN DER TRANSCHORTER FOR SERBENDORFER we hereby establish our Trrevocable Standby Lette in your favor, at the request and for the Avenue, Chicago, Illinois 60631-3504, up to the aggregate amount to the aggregate aggregate amount to the aggregate amount to the aggregate aggr

Hack to be supported to the control of the control The Total Control of Credit No. (SDC-743-001488, and the control of the control o

Augustications required the amount of the draft is payable pursuant to an increase and the draft is payable pursuant to an increase and an inc regulations issued under authority of the Resource Conservation and recovery Act of 1976 as amended. We seek a transfer to the seek and the seek and

This letter of credit is effective as of April 26, Fr. 1988 Times & from 1988, and shall expire on April 26, 1989, but such margins at wellexpiration date shall be automatically extended for a period of I year on April Zoth and on each successive expiration Laurence the current expiration some least 120 days before the current expiration some date, we notify both you and American National Language of that we have decided not to extend this letter of date, we notify both you and American National Can Company by credit beyond the current expiration date In the event you are ackers are so notified, any unused portion of the credit shall be available ... Supon presentation of your sight draft for 120 days after the date of receipt by both you and American National Can Company res: ... shown on the signed return receipts. A Department of the signed return receipts.

> Whenever this letter of credit is drawn on under and in : compliance with the terms of this credit; we shall duly honor such draft upon presentation to us, and we shall deposit the amount of the draft directly into the standby trust fund of ... American National Can Company in accordance with your instructions.

We certify that the wording of this letter of credit is ... identical to the wording specified in 40 CFR 264.151 (d) as such regulations were constituted on the date shown immediately below.

This credit is subject to the Uniform Customs and Practice for Documentary Credits (1983)_Revision, ICC/publication 490.

THE THE TANK IN THE PROPERTY IN THE TRANSPORT IN THE PROPERTY

Chfistina Weish

The Dai-Ichi Kangyo Bank, Ltd., Chicago

April 26, 1988



April 11, 1995

Mr. Brain W. Riley
The Dai-Chi Kangyo Bank, Ltd.
Chicago Branch
10 South Wacker Drive, 26th Floor
Chicago, Illinois 60606

Dear Mr. Riley.

This is a transmittal letter which is accompanying letter of credit number SDC-743-001488, dated April 26, 1988. The letter of credit has The Dai-Chi Kangyo Bank, Ltd. specified as the issuer and the United States Environmental Protection Agency (U.S. EPA) specified as the baneficiary. Mr. Richard E. Vaille, Chief of the Waste Compliance Branch for Region TV of U.S. EPA recently sent you a letter approving the release of the letter of credit, copy enclosed.

American National Can Company has replaced letter of credit number SDC-743-001488 with letter of credit number SDC-743-002816 in the amount of \$100,000 dated January 17, 1995, issued by The Dai-Chi Kangyo Bank, Ltd. and the Department of Toxic Substances Control (DTSC) is specified as the beneficiary on the new letter of oredit. Therefore, DTSC is returning letter of credit number SDC-743-001488.

If you have any questions, please contact Ms. Deborah McDowell of my staff at (916) 323-8325.

Sincerely,

THE ATTACHMENT TO THIS LETTER WAS A KERIX OF THE UL INSTERO OF THE OLISPINGL UL.

Mr. Jeffrey Mahan, Chief Audits, Financial Responsibility, and

Special Investigations Unit

Enclosures

Certification No: P 806 024 729

cc: (next page)



American National Can Co. Iny April 11, 1995 Page 2

-cc:

Ms Elsine Schimmel (H 4-1)
U.S. EPA - Region IX
75 Hawthorne Street
San Francisco, California 94105-3901

Mr. Joseph S. Moran
Assistant General Counsel - Environmental
American National Can Company
8770 West Bryn Mawr Avenue
Chicago, Illinois, 60631

Ms. Kristen Bretz
The Dai-Chi Kangyo Bank, Ltd.
Chicago Branch
10 South Wacker Drive, 26th Floor
Chicago, Illinois 60606

Parti Barni, Chief
DTSC-Statewide Compliance Branch
700 Heinz Avenue, Suite 200
Berkeley, California 94710

Routh Wabash Avenue, Chicago, Illinois 60603

Phone: 312/782-5400 Telex: 25-4515

DATE OREDIT NO. APRIL 21, 1989 -SDC-743-001488

E BOUEDREDAEDREDAEDRED AMENDMENT TO IRREVOCABLE STANDBY LETTER OF CREDIT

MISBKED - COKET - EDKEDKDOKEDNEL KEDKADKSOKBDKBDKBD LEDNEDKDD LEGMEDKEDKEDKEG KELFEDFEDKE

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

lagkezyregy $oldsymbol{ ext{REGION}}$ (edkedkedkedkedkedkedked $oldsymbol{ ext{REGION}}$), edk

GODGEDKERK E<mark>215 FREMONT (STREET</mark> KARKERKER) EDKARKERKEDKARKER

Action

. . . :

File:

APPLICANT: AMERICAN NATIONAL CAN COMPANY

-8770 WEST BRYN MAWR AVENUE

ECH BOKEDKEDKEDK<u>ELMEN</u>EDKEDKEDKEDKEDKEDKEDKEDKEHKEDKEDKEDKEDKEDKEDKEDKEDKEDKE

"CHICAGO, ILL. 60631

GENTLEMEN:

THE ABOVE MENTIONED CREDIT HAS BEEN AMENDED AS FOLLOWS.

A BIRBI NEW HIS CONFOREDKEDKEDKEDKEDKEDKEDKEDKEDKEDKED (PORFORI DREI GEJKIDKEDKED

THE AMOUNT WILL BE INCREASED BY \$858.00 EFFECTIVE APRIL 21, 1989 MAKING THE NEW AVAILABLE BALANCE \$26,157.00.

VERY TRULY YOURS,

THE DAI-ICHI KANGYO BANK LTD., CHICAGO BRANCH

LINKON ETHIT OF A TO ETHEORED LED CONTROL STAFF NETHER

..BIXIDALI

DKECKE - S.M. & THE CHIE CH. BOKEDKEC KADY BOKCT AUTHORIZED

EXCEPT IN SO FAR AS OTHERWISE EXPRESSLY STATED, AS THE SON CONTINUED AND SERVED AND A STATED AND ASSESSED AND ASSESSED AND ASSESSED AS A STATED AND ASSESSED AS A STATED AND ASSESSED AS A STATED ASSESSED AS A STATED AS A ST THIS CREDIT IS SUBJECT TO THE UNIFORM CUSTOMS AND PRACTICE FOR DOCUMENTARY CREDITS (1983) REVISION, ICC PUBLICATION 400.

BISTUKED-DDE CURET KETKEDKUDSED - BO:

LINE IN LIGHT BREWER

·· FOKBOKRIA K. · AKA K. INDINBOKBOKDOKDINBI MKIAKBOKO

MAKANYA KANDARA KANDAR

12/7/99

CERTIFIED MAIL RECEIPT NO. Z 387 950 295 RETURN RECEIPT REQUESTED

In Reply, Refer to WST-3

Mr. John Sneed Vice President and Group Leader The Dai-Chi Kangyo Bank, Ltd. Chicago Branch 10 South Wacker Drive, 26th Floor Chicago, Illinois 60606

Subject:

Termination of Letter of Credit SDC-743-001488

American Can Company, Oakland, California

Dear Mr. Sneed:

On February 13, 1995, the United States Environmental Protection Agency (EPA), Region 9, sent a letter to the American National Can Company authorizing release of Letter of Credit (LOC) SDC-743-001488, dated April 26, 1988 (Enclosure 1). This LOC was issued by your bank to the American National Can Company of Chicago, Illinois, for their facility in Oakland, California (Enclosure 2). The Regional Administrator of EPA Region 9 was listed as the beneficiary.

On April 11, 1995, the California Department of Toxic Substances Control (DTSC) sent a letter to the Dai-Chi Kangyo Bank, Ltd., stating that it was returning the LOC SDC-743-001488 (Enclosure 3). The LOC was being replaced by LOC SDC-743-002816 with DTSC as the beneficiary.

In October of this year, Gary Silha, Director of Treasury Operations, American National Can Company, contacted EPA Region 9. Mr. Silha stated that neither the bank nor American National Can Company ever received the original LOC SDC-743-001488 which was thought to have been included in the April 1995 letter by DTSC to the Dai-chai Kangyo Bank. Mr. Silha stated that the letter had included a photocopy of the LOC and not the original. EPA Region 9 has searched our files and we were unable to locate the original LOC. The DTSC has searched their files and also was not able to locate the original LOC.

Therefore, the EPA is again authorizing the release of LOC SDC-743-001488 (Enclosure 1). Since the original LOC has not been located and has been replaced with SDC-743-002816, the EPA authorizes the cancellation of LOC SDC-743-001488. This authorization of cancellation provides clarification that the EPA does not intend to draw on LOC SDC-743-001488.

Furthermore, during the EPA file search, we located an original amendment to LOC SDC-743-001488 dated April 21, 1989. Since the cancellation of LOC SDC-743-001488 is being approved, we are enclosing the original amendment (Enclosure 4) with this letter.

If you have any questions regarding this matter, please contact M. Kim Savage of my staff at (415) 744-2097.

Yours,

A Thams 2 dec 19

h Felicia Marcus Regional Administrator

enclosures

cc: Sue Laney

Department of Toxic Substances Control 10151 Croydon Way, Suite 3 Sacramento, CA 95827-2106

Marvel Bradshaw Department of Toxic Substances Control 700 Heinz Avenue, Suite 200 Berkeley, CA 94710-2721

Gary Silha
Director of Treasury Operations
American National Can Company
8770 W. Bryn Mawr Avenue - Mail Suite 10-G
Chicago, IL 60631-3542

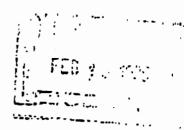


UNITED ST 'ES ENVIRONMENTAL PROTECTION A' NCY

REGION IX

75 Hawthorne Street San Francisco, CA 94105-3901

FEB 1 3 1995



Mr. Joseph S. Moran Assistant General Counsel - Environmental American Can Company 8770 West Bryn Mawr Avenue Chicago, Illinois 60631

Re: EPA's Release of Letter of Credit No. 5DC-743-001488

Dear Mr. Moran:

This letter is in response to a request from Deborah McDowell, Financial Responsibility Coordinator, California Department of Toxic Substances Control (DTSC), that the United States Environmental Protection Agency (EPA) authorize the release of letter of credit number SDC-743-001488. This letter of credit was issued on April 26, 1988 by the Dai-Chi Kangyo Bank, Ltd, to provide Financial assurance for closure of American Can Packaging, Inc., EPA ID No. CAD 009 162 116, and cites U. S. EPA as beneficiary.

On August 1, 1992. EPA granted final authorization to the State of California, Environmental Protection Agency, DTSC, to operate the State's hazardous waste program, subject to the authority retained by EPA in accordance with the Hazardous and Solid Waste Amendments of 1984 (HSWA) [Federal Register, Vol. 57, No. 143, Thursday, July 23, 1992, pgs. 42726-32730 enclosed].

Thus, RCRA financial responsibility mechanisms required under 40 Code of Federal Regulations 264/265 Subpart H and the California Code of Regulations 66264/66265 Title 22, Article 8, must now be payable to the Department of Toxic Substances Control (Department) rather than to the EPA Regional Administrator.

Accordingly, EPA authorizes the release and return to your office of letter of credit number SDC-743-001488, with the understanding that it shall be immediately replaced with an alternative mechanism of equal or greater value.

LCC submitted 4/26/EF

Printed on Recycled Paper

If you have any questions regarding the above, please do not hesitate to call me at (415) 744-2090 or Elaine Schimmel of my staff at (415) 744-2146.

Sindally,

Richard E. Va

Chief

Waste Compliance Branch

Enclosure

cc: Deborah McDowell, DTSC-HQ16, Sacramento, w/o enc.

Phone: 312/782-5400 Telex: 25-4515 「ひおきわれることをひせるとなるということでんとうべつひかべ TENNISTRATIONS LEGISLATING THE PROBLEMS BURES HERE だまされらつべきされるとればられるかださられらわれらかにだけ (ならんき.)・ **国民大学の大学の代表の作者は不足のとなって、名のと言いて、これをではない。というのではような、メイチをは、はられて、マーチを持ついるのが発生とするとうなった。** 大きたれるの人ものおおはマコミメルサトルのとなる APRIL -26, 1982 - CARCEMBARGERGE CAR CLARA COM LANGER ESPECACE ACT ACAR ACTION CENTERCENTER ACTION TO <u>ಸ್ವರ್ಧ ಅಧಿಸಕ್ಷಾನೆ ನೀಡುಗಳಲ್ಲಿ ಸರಿಗಳು ನಿರ್ದೇಶದ ಕ್ಷಣಗಳು ಸಂಗ್ರತ್ತಗಳ ಅಧಿಸರಿಗಳು ಕ್ಷಣಗಳು ಅಧಿಸ್ಥಾನ ಕ್ಷಣಗಳು ಸಂಗ್ರತ್ ಕ್ಷಣಗಳು ಸಂಗ್ರತ್ತಿ ಸ್ಥಾನಕ್ಕೆ ಸಂಗ್ರತಿ ಸ್ಥಾನಕ್ಕೆ ಸ್ಥ</u> actor sentendence to the final - Administrator space to the sentence of the se idha okabhanya wita hkabkad kad karkara kabka da kabkad kanga kanga kanga kanga kabkad kabkad kaba kaba kaba k SYSCHER PROPERSON SENSON SENSO ADDRESS OF THE STANDARD WE Hereby establish our Trrevocable Standby Letter of Englishment and for the SUSTINGUES TO AMERICAN NATIONAL CAN COMPANY : 8770 West Bryn Mawres Avenue, Chicago Illinois 60631-3504, up to the aggregate amount Research of Twenty-five Thousand Two Hundred Winety-nine U.S. Dollars salengerkenkungs(\$25,299:00); available UponToresentation by Any one of your of selection by Any one of your of ひんきしんきしん さいとうしんきゃんごう くだら ZDNOSNOSNO DERON SOLEN, your seight drafty bearing reference too this dietter sent and company in the of credit No. 1050007434001488, and so it can industrial examples in the configuration 'ನಿಲ್ಲಿ ಕ್ರಮ <mark>ತಿನಿಭಕ ೫೦೯ ಪ್ರಗಾಶಿ ಎರಗಿ ಎ</mark>ಗಗಿ ಕ್ರಮ ಕ್ರಮ ಕ್ರಮ ಸ್ಥಾಪ್ತನೆಗಳ ಬಿಡ್ಡು tables to consider to like the transplant of the second of Abover-to require certify-that the amount of the draft is payable pursuant to-be and regulations issued under authority of the Resource Conservation and Recovery Act of 1976 as amended " regovernative recover a This Tetter of credit is effective as of April 25, 1988, and shall expire on April 26, 1989, but such action at the action of expiration date shall be automatically extended for a period of 1 year on April 25th and on each successive expiration date, unless, at least 120 days before the current expiration and are date, we notify both you and American National Can Company by .certified mail that we have decided not to extend this letter of credit beyond the current expiration date. In the event you are so notified, any unused portion of the credit shall be available; supon presentation of your sight draft for 120 days after the date of receipt by both you and American National Can Company tast as shown on the signed return receipts. ... -

Whenever this letter of credit is drawn on under and in compliance with the terms of this credit; we shall duly honor such draft upon presentation to us, and we shall deposit the amount of the draft directly into the standby trust fund of American National Can Company in accordance with your instructions.

We certify that the wording of this letter of credit is identical to the wording specified in 40 CFR 264.151 (d) as such regulations were constituted on the date shown immediately below.

This credit is subject to the Uniform Customs and Practice for Documentary Credits (1983) Revision, ICC publication 400.

Chfistina Weish
The Dai-Ichi Kangyo Bank, Ltd., Chicago
April 26, 1988

DEPARTMENT OF TOXIC SUBSTANCES CONTROL

400 P Street, 4th Floor P.O. Box 806 Socramento, CA 95812-0806 (915) 322-3169



April 11, 1995

Mr. Brain W. Riley
The Dai-Chi Kangyo Bank, Ltd.
Chicago Branch
10 South Wacker Drive, 26th Floor
Chicago, Illinois 60606

Dear Mr. Riley:

This is a transmittal letter which is accompanying letter of credit number SDC-743-001488, dated April 26, 1988. The letter of credit has The Dai-Chi Kangyo Bank, Ltd. specified as the issuer and the United States Environmental Protection Agency (U.S. EPA) specified as the beneficiary. Mr. Richard E. Vaille, Chief of the Waste Compliance Branch for Region IV of U.S. EPA recently sent you a letter approving the release of the letter of credit, copy enclosed.

American National Can Company has replaced letter of credit number SDC-743-001488 with letter of credit number SDC-743-002816 in the amount of \$100,000 dated January 17, 1995, issued by The Dai-Chi Kangyo Bank, Ltd. and the Department of Toxic Substances Control (DTSC) is specified as the beneficiary on the new letter of oredit. Therefore, DTSC is returning letter of credit number SDC-743-001488.

If you have any questions, please contact Ms. Deborah McDowell of my staff at (916) 323-8325.

Sincerely,

THE ATTACHMENT TO THIS LCTTON WAS A KERIX OF THE UL INSTEAD OF THE UL INSTEAD

Mr. Jeffrey Mahan, Chief Audits, Financial Responsibility, and Special Investigations Unit

Enclosures Certification No: P 806 024 729 cc: (next page)



American National Can Company April 11, 1995 Page 2

CC: Ms. Elaine Schimmel (H 4-1)
U.S. EPA - Region IX
75 Hawthorne Street
San Francisco, California 94105-3901

with the control of t

Mr. Joseph S. Moran
Assistant General Counsel - Environmental
American National Can Company
8770 West Bryn Mawr Avenue
Chicago, Illinois, 60631

Ms. Kristen Bretz
The Dai-Chi Kangyo Bank, Ltd.
Chicago Branch
10 South Wacker Drive, 26th Floor
Chicago, Illinois 60606

Parti Barni, Chief
DTSC-Statewide Compliance Branch
700 Heinz Avenue, Suite 200
Berkeley, California 94710

uth Wabash Avenue, Chicago, Illinois 60603
 Phone: 312/782-5400 Telex: 25-4515

DATE

CREDIT NO.

APRIL 21, 1989

SDC-743-001488

AMENDMENT TO IRREVOCABLE STANDBY LETTER OF CREDIT

TO: REGIONAL ADMINISTRATOR
UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION IX
215 FREMONT STREET

TURNER MOREL MODERNOR ROKEOFED ...

SOMEOUR PARTHER MEDICAL PROPERTY STANDARDS

SAN FRANCISCO, CA. 94105

EDER EDRO DEG<u>ORDERE A</u> DES EN<mark>DE</mark> EDE 5,00 (DEGEN 2011).

APPLICANT: AMERICAN NATIONAL CAN COMPANY 8770 WEST BRYN MAWR AVENUE CHICAGO, ILL. 60631

rRA/DRA	4/28
Action	T-2
CC:	en e
File: _	

GENTLEMEN:

THE ABOVE MENTIONED CREDIT HAS BEEN AMENDED AS FOLLOWS.

THE AMOUNT WILL BE INCREASED BY \$858.00 EFFECTIVE APRIL 21, 1989 MAKING THE NEW AVAILABLE BALANCE \$26,157.00.

VERY TRULY YOURS.

THE DAI-ICHI KANGYO BANK LTD., CHICAGO BRANCH

AUTHORIZED SIGNATURE

EXCEPT IN SO FAR AS OTHERWISE EXPRESSLY STATED, THIS CREDIT IS SUBJECT TO THE UNIFORM CUSTOMS AND PRACTICE FOR DOCUMENTARY CREDITS (1983) REVISION, ICC PUBLICATION 400.

ANA KARAKA SAK KARAWA WANA KAMAKA KAM

TO: Kim Savage Gary Silha, Dir. Treasury Operations American Nat'l Can Co. American Nat'l Can Co.	RECORD OF COMMUNICATION					
W31-3						

SUBJECT:

Letter of Credit SDC-743-001488, American National Can Company

American Can Company, Oakland, California

SUMMARY OF COMMUNICATIONS:

Mr. Silha contacted me for assistance. Both EPA and DTSC had released, in 1995. a Letter of Credit (SDC-743-001499) which had EPA as the beneficiary. DTSC's letter stated "DTSC is returning letter of credit number SDC-743-001488." However, Mr. Silha stated that neither the Dai-Chi Kangyo Bank, Ltd. nor the American National Can Company ever received the original of the LOC. Mr. Silva asked that I attempt to locate the original and return it to the bank. This LOC has been replaced by another LOC with DTSC as the beneficiary.

I contacted both the HQ and Berkeley offices of DTSC. After searching through their files and the safe they could not locate the original. I have searched through the EPA files and found an original of an amendment to said LOC, but not the original LOC.

Mr. Silha and I talked again and it was determined that a letter was necessary to the bank so that the bank could cancel the LOC. According to Mr. Silha, the letter should state that the original could not be located, attach a photocopy, allow the cancellation and state that EPA will not draw upon this LOC (this is okay since they have replaced the LOC with another for compliance with the FA requirements).

I told Mr. Silha that I would send a letter to the bank.

CONCLUSIONS, ACTION TAKEN OR REQUIRED:

EPA will send a letter to the bank stating that the original could not be located, enclose a photocopy, allow cancellation and state that EPA will not draw upon the LOC.

P.1/6

FAX TRANSMISSION

AMERICAN NATIONAL CAN COMPANY 8770 W. Bryn Mawr Avenue - Mail Suite 10G Chicago, Illinois 60631-3542 773-399-3145

Fax: 773-399-3115

Date:	10-15-11	
To:	Kim Savage	
From:	Gary A. Silha Director of Treasury Operations	
Subject:	CANCELLED L/C	
Pages:	, including this cover sheet.	•
Fax No.:	415-744-1044	
COMMEN	NTS:	
	I APPRECIATE YOUR HELP. PHASE OF AND ABLE TO SOLVE THIS MYSTERY.	caune as 773-399-3145
	THAMES.	

GARY D SILVA

DEPARTMENT OF TOXIC SUBS' NCES CONTROL

400 P Street, 4th Floor P.O. Box 806 Socramento, CA 95812-0806 (915) 322-5169



April 11, 1995

Mr. Brain W. Riley
The Dai-Chi Kangyo Bank, Ltd.
Chicago Branch
10 South Wacker Drive, 26th Floor
Chicago, Illinois 60606

Dear Mr. Riley.

This is a transmittal letter which is accompanying letter of credit number SDC-743-001488, dated April 26, 1988. The letter of credit has The Dai-Chi Kangyo Bank, Ltd. specified as the issuer and the United States Environmental Protection Agency (U.S. EPA) specified as the beneficiary. Mr. Richard E. Vaille, Chief of the Waste Compliance Branch for Region IV of U.S. EPA recently sent you a letter approving the release of the letter of credit, copy enclosed.

American National Can Company has replaced letter of credit number SDC-743-001488 with letter of credit number SDC-743-002816 in the amount of \$100,000 dated January 17, 1995, issued by The Dai-Chi Kangyo Bank, Ltd. and the Department of Toxic Substances Control (DTSC) is specified as the beneficiary on the new letter of credit. Therefore, DTSC is returning letter of credit number SDC-743-001488.

If you have any questions, please contact Ms. Deborah McDowell of my staff at (916) 323-8325.

Sincerely.

THE ATTACHMENT TO THIS LCTTON WAS A XERIX OF THE LIC INSTERIOR OF THE OCIGIONAL LIC.

Mr. Jeffrey Mahan, Chief Audits, Financial Responsibility, and Special Investigations Unit

Joby Maha

Enclosures

Certification No: P 806 024 729

cc; (next page)



American National Can Company April 11, 1995 Page 2

CC: Ms. Elaine Schimmel (H 4-1)
U.S. EPA - Region IX
75 Hawthorne Street
San Francisco, California 94105-3901

A STATE OF THE PROPERTY OF THE PARTY OF THE

Mr. Joseph S. Moran Assistant General Counsel - Environmental American National Can Company 8770 West Bryn Mawr Avenus Chicago, Illinois, 60631

Ms. Kristen Bretz
The Dai-Chi Kangyo Bank, Ltd.
Chicago Branch
10 South Wacker Drive, 26th Floor
Chicago, Illinois 60606

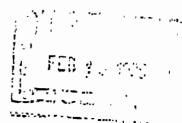
Parti Barni, Chief
DTSC-Statewide Compliance Branch
700 Heinz Avenue, Suite 200
Berkeley, California 94710



UNITED STALES ENVIRONMENTAL PROTECTION AGLACY REGION IX

75 Hawthorne Street San Francisco, CA 94105-3901

FEB 1 3 1995



Mr. Joseph S. Moran Assistant General Counsel - Environmental American Can Company 8770 West Bryn Mawr Avenue Chicago, Illinois 60631

Re: EPA's Release of Letter of Credit No. 5DC-743-001488

Dear Mr. Moran:

Ling gelevited i

This letter is in response to a request from Deborah McDowell, Financial Responsibility Coordinator, California Department of Toxic Substances Control (DTSC), that the United States Environmental Protection Agency (EPA) authorize the release of letter of credit number SDC-743-001488. This letter of credit was issued on April 26, 1988 by the Dai-Chi Kangyo Bank, Ltd, to provide Financial assurance for closure of American Can Packaging, Inc., EPA ID No. CAD 009 162 116, and cites U. S. EPA as beneficiary.

On August 1, 1992. EPA granted final authorization to the State of California, Environmental Protection Agency, DTSC, to operate the State's hazardous waste program, subject to the authority retained by EPA in accordance with the Hazardous and Solid Waste Amendments of 1984 (HSWA) [Federal Register, Vol. 57, No. 143, Thursday, July 23, 1992, pgs. 42726-32730 enclosed].

Thus, RCRA financial responsibility mechanisms required under 40 Code of Federal Regulations 264/265 Subpart H and the California Code of Regulations 66264/66265 Title 22, Article 8, must now be payable to the Department of Toxic Substances Control (Department) rather than to the EPA Regional Administrator.

Accordingly, EPA authorizes the release and return to your office of letter of credit number SDC-743-001488, with the understanding that it shall be immediately replaced with an alternative mechanism of equal or greater value.

Printed on Recycled Paper

If you have any questions regarding the above, please do not hesitate to call me at (415) 744-2090 or Elaine Schimmel of my staff at (415) 744-2146.

Sind Ally.

Righard E. Vaille

Chief

Waste Compliance Branch

Enclosure

cc: Deborah McDowell, DTSC-HQ16, Sacramento, w/o enc.

~ ~ ~ ~ ~

AUG 1777 ATA ATA TENT AGEA

i Wabash Avenue-Chicago, Illinois 60603

ביי ביי בקבסת אס. ייי ופיים בייים ביים ביים ביים

APRIL-26, 1988 SECRET SERVERSERS CONTROL SDC-743-001488 ICKSERSERS

solockendon/colockegional-'Administrator-speckeskeskeskeskeskeskeskeskeskesk

יאפראפטינטראים בייניים אוניים בייניים אוניים בייניים אוניים בייניים ביינים ביינים ביינים ביינים ביינים ביינים ביינים ביינים ביינים בי

.ವರ್ಷದರ್ಜನದ ಸಂಪರ್ಧನೆ ಕಾರ್ಯಕರ ಇರು ಇರು ಇರು ನಿರ್ದೇಶಗಳ ಮುಖ್ಯವಾಗಿ ಬಿಡ್ಡು ಬಿಟ್ಟಿಯ ಅನ್ನು ಪ್ರಾರೇಶ ಪ್ರಕರಣ ಪಡೆದು ಪ್ರತಿ ನ ಕರ್ನ ನಿರ್ದೇಶ ಸಂಪರ್ಧನೆ ಕ್ಷಮ ಕರ್ನ ಬರು ಕ್ಷಮ ಸ್ಥಾನಕ್ಕೆ ಮಾಡು ಪಡೆದು ಬರು ಸ್ಥಾನಕ್ಕೆ ಸ್ಥಾನ ಸ್ಥಾನ್ ಸ್ಥಾನಕ್ಕೆ ಸ್ಥಾನಕ್ಕೆ ಸ zwadwa∩wagwijungamegwadwowogwankegwadwogwan. ಸಂಗ-_"ರಾಗ್ಯಾಜ್ಡಿಕೆ//ಕ್ಷಿಗ್ಗೆ 2040cya⊆watwacwag

we hereby establish our Irrevocable Standby Letter of on commence and Credit No. SDC-743-001488 in your favor; at the request and for the

ರಿನಿರುಗಳಿಗೆ ಬರಿಗೆ ಮುಂದು ಕಡೆಗೆ ಮೇಗೆ ಮುಂದು ಕಡೆಗೆ ಮುಂದು ಕಡೆಗೆ

Avenue, Chicago, Illinois 60631-3504, up to the aggregate amount CHARSENES TO T. Twenty-five Thousand Two Hundred Ninety-nine U.S. Dollars specific New Fig. (\$25,299:00); available: Upon presentation by any one of your of specific of section and the section of the

Received the control of the control akradestratava kom officredit Notesdour4434001488, andra kita kabi saketases tiret talastraturar a Researchase apresina est tirkkilia in sikumistiskirala alika sikas kabi saketasena apresina kabi saketaseka ka ರವಿ ನಿರ್ವಹಿತರಣಗಳಿಗೆ ಎಂದು ಬಾಗಿ ಬಿಡುಗಳಿಗೆ ಬರುಕ್ಕೆ ಬಿಡುಗಳು ಬಿಡುಗಳು

non-the control of 2 cm your signed statement reading as follows and "Inchronger ser 240347-00 15 112-7 certify that the amount of the draft is payable pursuant to 12-1-1 regulations issued under authority of the Resource Conservation The service of the second of the service of the ser

This letter of credit is effective as of April 25, -- ... 1988, and shall expire on April 26, 1989, but such acceptant of expiration date shall be automatically extended for a period of 1 year on April 25th and on each successive expiration date, unless, at least 120 days before the current expiration puredate, we notify both you and American National Can Company by certified mail that we have decided not to extend this letter of credit beyond the current expiration date. In the event you are so notified, any unused portion of the creditishall be available; supon presentation of your sight draft for 120 days after the date of receipt by both you and American National Can Company, as: shown on the signed return receipts.

> Whenever this letter of credit is drawn on under and in : compliance with the terms of this credit; we shall duly honor such draft upon presentation to us, and we shall deposit the amount of the draft directly into the standby trust fund of American National Can Company in accordance with your instructions.

We certify that the wording of this letter of credit is identical to the wording specified in 40 CFR 264.151 (d) as such regulations were constituted on the date shown immediately below.

This credit is subject to the Uniform Customs and Practice

for Documentary Credits (1983)_Revision, ICC/publication 490. CHENERAL MANAGEMENT INTERPRETATION OF THE MANAGEMENT AND ASSESSMENT ASSESSMENT AND ASSESSMENT ASSESSME

Chfistina Welsh

The Dai-Ichi Kangyo Bank, Ltd., Chicago

April 26, 1988

FORM 1-412 (1 OF 5)

uth Wabash Avenue, Chicago, Illinois 60603 Phone: 312/782-5400 Telex: 25-4515

DATE CREDIT NO. SDC-743-001488

AMENDMENT TO IRREVOCABLE STANDBY LETTER OF CREDIT

TO: REGIONAL ADMINISTRATOR BENEFIT A PLANTA KEEP BUREAU

DKE OKDIA BI KBORRISKBIRKBIR<mark>bokbokbokbokbokbo</mark>kb

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

PARENTAL CONTROL CONTROL OF THE CONTROL OF THE CONCORRORANCE OF A CONCORRORANCE AND CONTROL OF THE CONTROL OF T

E PKROKOP ET KRONESDED KTOKED KBÖKROKSOKODESDE SELED Ú 19 FONT 19 FORDOL 19 KROKSOLSOF D

KEDKEDKEC215 FREMONT STREET KEDKEDKEDEL LIK

SAN FRANCISCO, CA. 94105

. HER THEORET ENERGY BOWN DIE BOKE DE BORD DE KEOP KEN DE LE

APPLICANT: AMERICAN NATIONAL CAN COMPANY

8770 WEST BRYN MAWR AVENUE

CHICAGO, ILL. 60631

#/28

RA/DRA

Action ______

CC: _____

File: _____

GENTLEMEN:

THE ABOVE MENTIONED CREDIT HAS BEEN AMENDED AS FOLLOWS.

THE AMOUNT WILL BE INCREASED BY \$858.00 EFFECTIVE APRIL 21, 1989 MAKING THE NEW AVAILABLE BALANCE \$26,157.00.

VERY TRULY YOURS.

THE DAI-ICHI KANGYO BANK LTD., CHICAGO BRANCH

AUTHORIZED SIGNATURE

EXCEPT IN SO FAR AS OTHERWISE EXPRESSLY STATED, THIS CREDIT IS SUBJECT TO THE UNIFORM CUSTOMS AND PRACTICE FOR DOCUMENTARY CREDITS (1983) REVISION, ICC PUBLICATION 400.

PRINCES OF STREET



A Maria Company of the Company of th

March 30, 1989

Regional Administrator
United States Environmental
Protection Agency
Region IX
215 Fremont Street
San Francisco, CA 94105

Dear Sirs:

In accordance with the requirements of 40 C.F.R. Part 265, American National Can Company hereby submits the enclosed documents which satisfy the financial assurance requirements:

- 1. Letter from the Chief Financial Officer
- Letter from Touche Ross & Co.
- Audited Financial Statements of American National Can Company for the period ended December 31, 1988.

Any questions related to the enclosed documents may be referred to Richard A. Kabaker, Esq. (312-399-3526) of this office, or to Maria Lubienski Ciokajlo, Esq., of Cadwalader, Wickersham & Taft, 100 Maiden Lane, New York, NY 10038 (212-504-6766).

Very truly yours,

Kristine K. Partain Financial Analyst

KKP174/amd

Enclosures

cc: R. Kabaker - ANCC

M. Lubienski - Cadwalader

▲ American ▲ National Can

COMPANY CONFIDENTIAL

March 28, 1989

Regional Administrator
United States Environmental
Protection Agency
Region IX
215 Fremont Street
San Francisco, CA 94105

Dear Sir:

I am the Chief Financial Officer of American National Can Company, 8770 West Bryn Mawr Avenue, Chicago, Illinois 60631-3504. This letter is in support of the use of the financial test to demonstrate financial responsibility for liability coverage as specified in Subpart H of 40 CFR Parts 264 and 265.

The firm identified above is the owner or operator of the following facilities for which liability coverage for sudden accidental occurrences is being demonstrated through the financial test specified in Subpart H of 40 CFR Parts 264 and 265: See Exhibit A.

The firm identified above guarantees, through the corporate guarantee specified in Subpart H of 40 CRF Parts 264 and 265, liability coverage for sudden accidental occurrences at the following facilities owned or operated by the following subsidiaries of the firm: None

This firm is not required to file a Form 10K with the Securities and Exchange Commission (SEC) for the latest fiscal year.

The fiscal year of this firm ends on December 31. The figures for the following items marked with an asterisk are derived from this firm's independently audited, yearend financial statements for the latest completed fiscal year, ended December 31, 1988.

EXHIBIT A

Plant Identification

- 1. Oakland Plant
 3801 East 8th Street
 Oakland, CA 94601
 EPA ID # CAD 009162166
- 2. San Jose Plant
 1598 S. First Street
 San Jose, CA 95110
 CPA ID # CAD 990768871



COMPANY CONFIDENTIAL

April 14, 1988

Regional Administrator
United States Environmental
Protection Agency
Region IX
215 Fremont Street
San Francisco, California 94105

Dear Sir:

I am the Chief Financial Officer of American National Can Company, 8770 West Bryn Mawr Avenue, Chicago, Illinois 60631-3504. This letter is in support of the use of the financial test to demonstrate financial responsibility for liability coverage as specified in Subpart H of 40 CFR Parts 264 and 265.

The firm identified above is the owner or operator of the following facilities for which liability coverage for sudden accidental occurrences is being demonstrated through the financial test specified in Subpart H of 40 CFR Parts 264 and 265: See Exhibit A.

The firm identified above guarantees, through the corporate guarantee specified in Subpart H of 40 CFR Parts 264 and 265, liability coverage for sudden accidental occurrences at the following facilities owned or operated by the following subsidiaries of the firm: None.

This firm is not required to file a Form 10K with the Securities and Exchange Commission (SEC) for the latest fiscal year.

The fiscal year of this firm ends on December 31. The figures for the following items marked with an asterisk are derived from this firm's independently audited, year-end financial statements for the latest completed fiscal year, ended December 31, 1987.

Regional Administrator April 14, 1988 Page 2

Part A. Liability Coverage for Accidental Occurrences

ALTERNATIVE I

1.	Amount of annual aggregate liability coverage to be demonstrated	\$ 2,000,000.00
*2.	Current assets	\$1,206,027,000.00
*3.	Current liabilities	\$ <u>1,055,028,000.00</u>
4.	Net working capital (line 2 minus line 3)	\$ 150,999,000.00
* 5.	Tangible net worth	\$ 79,867,000.00
*6.	If less than 90% of assets are located in the U.S., give total U.S. assets	\$2,590,586,000.00
		YES NO
7.	Is line 5 at least \$10 million?	X
8.	Is line 4 at least 6 times line 1?	_X
9.	Is line 5 at least 6 times line 1?	_X
*10.	Are at least 90% of assets located in the U.S.? If not, complete line 11.	X
11.	Is line 6 at least 6 times line 1?	<u>X</u>

I hereby certify that the wording of this letter is identical to the wording specified in $40\ \text{CFR}\ 264.151(g)$ as such regulations were constituted on the date shown immediately below.

Walter T. Stelzel

Executive Vice President,

Chief Financial Officer and Treasurer

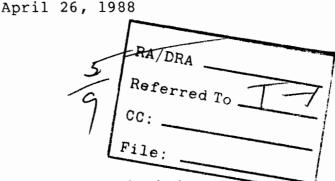
April 14, 1988

EXHIBIT A

	Plant Identification	Closure	Current Cost Estimate
1.	Barrington Technical Center 433 N. Northwest Highway Barrington, Illinois 60010 EPA ID #ILD 047922323	\$	9,000.00
2.	Bellwood Plant 2400 Maywood Drive Bellwood, Illinois 60104 EPA ID # ILD 005142351	\$	6,000.00
3.	Des Moines Plant 1500 East Aurora Des Moines, Iowa 50316 EPA ID # IAD 001818327	\$4	00,000.00
4.	Hoopeston Plant 324 W. Main Street Hoopeston, Illinois 60942 EPA ID # ILD 005462361	\$	14,000.00
5.	Lemoyne Plant 221 South Tenth Street Lemoyne, Pennsylvania 17043 EPA ID # PAD 003024551	\$1	41,000.00
6.	Oakland Plant 3801 East 8th Street Oakland, California 94601 EPA ID # CAD 009162116	\$	22,923.00
7.	San Jose Plant 1598 S. First Street San Jose, California 95110 EPA ID # CAD 990768871	\$	2,376.00

American National Can

Regional Administrator
United States Environmental
Protection Agency
Region IX
215 Fremont Street
San Francisco, California 94105



Re: Financial Assurance for Closure and Liability Coverage

Dear Sir:

In accordance with the requirements of 40 C.F.R. Part 265, Subpart G, we herewith submit the following to establish financial assurance for closure and liability coverage for the facilities of American National Can Company indicated on the attached Exhibit A:

- 1. Letter of Credit No. SDC-743-001488 issued by The Dai-Ichi Kangyo Bank, Ltd., dated April 26, 1988;
- 2. Standby Trust Fund Agreement; and
- 3. Letter from the chief financial officer for liability coverage, including supporting documents.

Any questions relative to any of the enclosed documents may be referred to Richard A. Kabaker, Esq. (312-399-3526), of this office, or to Timothy G. Rogers, Esq., of Cadwalader, Wickersham & Taft, 100 Maiden Lane, New York, New York 10038 (212-504-6832).

Very truly yours,

horas in Eggs

Dennis M. Byrd

Manager - Financial Services

DMB243/jcw

Enclosures

cc: R. Kabaker - ANCC

T. Rogers - Cadwalader

California Department of Health Services

EXHIBIT A

- 1. Oakland Plant
 3801 East 8th Street
 Oakland, California 94601
 EPA ID #CAD 009162116
 Assured Closure Funds: \$22,923.00
- 2. Sun Garden Plant
 1598 S. First Street
 San Jose, California 95110
 EPA ID #CAD 990768871
 Assured Closure Funds: \$ 2,376.00

_	3/1
	RATORA
9 (2) 10 6 (2) 10 10 10 10 10 10 10 10 10 10 10 10 10	Referred To 1-1
The state of the s	CC:
American C	n Company

Timothy G. Rogers Assistant General Counsel American Lane P.O. Box 3610 Greenwich, Connecticut 06836 - 3610 203-552-3368

March 10, 1986

VIA FEDERAL EXPRESS

Regional Administrator United States Environmental Protection Agency Region IX 215 Fremont Street San Francisco, CA 94105

Coilect colled Pagers 7/7/86 the said the charge in owner! operator is delayed until the end of 1986. I told him Transfer of Facility Ownership and A to the State office.

Dear Sir:

Pursuant to 40 C.F.R. §270.72(d), American Can Company otifies you that: hereby notifies you that:

- (1) it currently owns and operates the facilities listed on the enclosed attachment;
- (2) it is in the process of establishing a wholly-owned subsidiary, American Can Packaging Inc.; and
- (3) ownership and operational control of the facilities listed on the enclosed attachment shall transfer to American Can Packaging Inc.

Upon completion of the transactions respecting this subsidiary, a revised Part A permit application will be filed by American Can Packaging Inc.

Any questions relative to this transfer should be directed to me.

Very truly your:

TGR/lg Enclosure /05891

ATTACHMENT

EPA Identification No. ORD009044520

Oakland Plant

3801 East 8th Street

7801 East 8th St

P. O. Box 2092

Oakland, California 94604

Telephone No. (209) 562-4014

EPA Identification No.

CAO 009162116

Sun Garden Plant

American Com Co.

PRO-Gen 750

1598 South First Street

San Jose, California 95110

Telephone No. (408) 292-3507

EPA Identification No. CAD990768871

Salem Plant

3334 Industrial Way, N. E.

P. O. Box 7107

Salem, Oregon 97303

Telephone No. (503) 585-5907



Procurement & Transportation Department

American Can Company

P.O. Box 2092 3801 E. 8th St. Oakland, Calif. 94604

May 22, 1984

Environmental Protection Agency 215 Fremont St. San Francisco, Ca. 94105

Subject: Exception Report

Gentlemen:

Attached is a copy of hazardous waste manifest number 83375156 dated April 23, 1984. This manifest was offered with a shipment of empty drums.

The transporter, who is also the recycler, refused to sign and accept the manifest with the shipment.

As of this date, we have not received our signed copy of the hazardous waste manifest from the treatment facility.

Very tyuly yours,

R. W. Timms, Mgr. Transportation

Western Region

encl.

NIFORM HAZARDOUS WASTE MANIFEST

714-744 P Street Sacramento CA 95814

Printed or typed full name and signature

STATE ID NUMBER

83375156

t or type with ELITE type (1.2 Charac	icis per inch).									
AMERICAN CAN 3801 EAST 85	COMPANY- C STREET					ANIFEST D		ENT NUME	ER	
OAKLAND, CALL AREA CODE/PHONE NUMBER	FORNIA - 74 (415) = 5	601 36-2400			CADO	DEV	65	11/6	841	01
MYERS DRUM C	OM PANY				CONTAINER NO)	INIBER	
CAK LAND, CALL	TORNIA - 946	608 (415) 271.	-6200	O(O)	10142	18/14	ıλr	NAV	1231	21
TRANSPORTER NO. 2/ALTERN	ATE TSD FACILITY	(11.3)	i ii	V.EH.	CONTAINER NO	D		EPA ID NU	MBER	
and the second second	CHE"		Sale.					tu.		
TREATMENT STORAGE OR D	ISPOSAL (TSD) FACILIT	<u>Y</u>	:	<u> </u>	Ш		1 1	EPA ID NU	 JMBER	
TREATMENT STORAGE OR D MYERS DRUM C 6549 SANPAR OAKLAND, CALI	OMPANY LO AVE: TORNIA - 94	608								
AREA CODE/PHONE NUMBER		(415) 27	1-6200					1091		
PROPER U.S. D.O.T. S	HIPPING NAME AND	HAZARD CLASS	UN/N/ NUMBI		TOTAL	WT/VO		NTAINER O. TYPE	CAT. N	TE DIS
EMPTY DRA	ums 49C	FR 173.29	Nan	VE	08000	P	20	DOM	511	20
		MPONENTS		111		CON	C. RAN	IGE	L	IITS
		WIFOINENTS				UPPER		LOWER	%	PPN
Empty PA	INT DRUMS	3.7	The same of the sa			100	<u> </u>			
Empty S	INT DRUMS OLVENT DRA	ums				100				<u> </u>
	,									
45.								****		
SPECIAL HANDLING INSTRUC										
										, V
This is to certify that the above proper condition for transportat	re-named wastes are pro ion according to the app	operly classified, describe licable requirements of the	ed, packaged, ma he Department o	arked and f Transpo	l labeled, and a ortation and the	FPA F	мо.	DAY	ן` ר	YR.
	44		- 41 1	, 7,,	aut.					 رين جم
Printed or typed full name and	1000011	L. MATTHEW:	5 11.1	· MI	uthehs		14	25	1	84
Check if continuation sheet TRANSPORTER 1 ACKNOWLE						ATE	мо.	DAY		VP
TRANSPORTER T ACKNOWLE	DGEMENT OF RECEIPT	OF ABOVE WASTES				ATE I EC'D &	VIO.	DAT		YR.
Printed or typed full name and TRANSPORTER 2 ACKNOWLE		OF ABOVE WASTES				ATE	MO.	DAY		YR.
THAINSFORTER 2 ACKNOWLE	DGENTENT OF RECENT	OF ABOVE WASTES				EC'D	WIO.	DAI		In.
Printed or typed full name and					ACC	EPTED	1	ii_		
DISCREPANCY INDICATION S	ACE									
1					**					* *
,					a.					:
Facility owner or operator: Cer discrepancy indication space ab			y this manifest	except as			DATE I	RECEIVED	¾ ACCEP	TED



Therese Sathue Manager, Solid Waste Compliance Corporate Public Affairs

American Can Company

American Lane Greenwich, Connecticut 06830 203-552-2181

November 24, 1980

EPA Region IX Attn: A-3-2

215 Freemont Street San Francisco, CA 94105

CAD009142116

RE: AMERICAN CAN COMPANY 3801 East 8th Street P.O. Box 2092

Oakland, CA 94604

Dear Sir:

Our letter of November 14, 1980 attached a completed Form 1 and Form 3 to cover the hazardous waste storage at our Oakland facility.

Please find attached the topographic map that was missing in our original submittal.

Very truly yours,

AMERICAN CAN COMPANY

There Sather /pl

Therese Sathue

TS/pah Attachment

cc: D. Fabrizio 099

CA DOO9162116



Therese Sathue
Manager Solid Waste Compliance
Corporate Public Affairs

American Can Company

American Lane Greenwich, Connecticut 06830 203-552-2181

November 14, 1980

U.S. EPA Region <u>IX</u>						
Attached is an Application for Hazardous Waste Permit for American Can						
Company's plant/facility located at <u>3801 East 8th Street PO 2092</u>						
Oakland, CA. 946604 .						
Missing information to be forwarded when available:						
\overline{X} EPA Identification Number						
\sqrt{X} Topographic Map						
/_/ Facility Photograph						

. Therese Sathue

7 horiso & Jatha

TS/pah Attachment

RECORDS SEPARATOR PAGE

7 JUN 1984

CAD 009 162 116

REFERRAL LETTER

Richard P. Wilcoxon, Chief Division of Toxic Substances Control California Department of Health Services 714 P Street Sacramento, CA 95814

Dear Mr Wilcoxon

EPA has recently received a Manifest Exception Report from American Can Company, Oakland, CA concerning a recent shipment of empty drums shipped on Manifest #83375156 dated April 23, 1984. This exception report was filed in accordance with 40 CFR 262.42.

Section II.B.2 of the Phase I Memorandum of Agreement (MOA) makes it the primary obligation of the State to take timely and appropriate action against persons in violation of generator, transporter and facility standards.

Please provide us with a copy of your compliance action. and all follow-up correspondence. Please record your compliance actions related to this case on your monthly inspection and compliance report.

If you have any questions or require additional information, please contact Paul D. Blais of my staff at (415) 974-8129.

Sincerely yours:

Original Signed by:

Phil Bobel Chief Toxics & Waste Programs Branch

Enclosure

cc: Tom Bailey, DOHS-HQ
Gil Jensen, DOHS-HQ
Dwight Hoenig DOHS-Berkeley

bc Blais	T-2-1	A CONCURRENC	ES	
SYMBOL TOZ-	TA B			
SURNAME Blax	your 150	1		
DATE 6/6/84	664	17		
EPA Form 1320-1 (12-70)	141			OFFICIAL FILE COPY

90 0809 90 0809 90 0809

TSDF UNIVERSE CHANGES TO HWDMS

Facility Facility	ID:CA	rican A	162116 Julianus Co	m (Oaklard)
Change	e field	Old value	New value	Reasoning/Documentation
[:]	c303 Non-Regulated			
2 4	c305 TSD Type	Margin Charles 19 19 10 10 10 10 10 10 10 10 10 10 10 10 10	3	
[]	c1103 TSD Notifier			<u> </u>
M	c1105 Permit Status	5	<u>2</u>	
[]	c1101 Generator			
[]	c1102 Transporter			
[]				
(I) Ins (E) EF (S) St (L)	able forms of Evident pection PA request ate agency request Letter from 3rd party Irn around document	y	hanges: (A)Part A (P)Permit (C)Closure permit C or L or W	
SUPPO If docum	RTING DOCUMENTA	ATION MUST BE AT	TACHED AND FILED IN why on the back of this	THE NOTIFICATION FILE.
		,	,	
	L. Lei	·		
Respon	isible Person		_	Date
900708	j ws			tsdfctrl.frm



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION IX

215 Fremont Street San Francisco, Ca. 94105

UNIVERSE CHANGES Facility Name: A	merican Natio	Date Changed 6/30/88 3/6/88(dd) and Can - Oakland		
Facility EPA ID #:	CAD00916211			
Changes				
FROM	TO	WHY/WHO		
C1105=5	C1105=Z	per L: Mlenars 11/87 chan request		
C305= black	C305=5	11/87 mm chan		
·		request		
<u>Comments:</u> /				
Supporting Documents Attached				
Yes	No If no, why	ny not		

Responsible Person:
L. Las'is T-28

CADOO9162116 HWDMS CHANGES EPA ID # FAC. NAME WHO NATIONAL CA Chery/Leh-/Michael Feels DATE AUTHORIZED BY: LETTER es 7/86 PERSON OLD NEW TSD STATUS (C305) PERMIT STATUS (C1105) HANDLER TYPES (C1101-C1103) **GENERATOR** TRANSPORTER TSD:

DATE

ENTERED BY

DEPARTMENT OF HEALTH SERVICES
2151 BERKELEY WAY
BERKELEY, CA 94704
(415) 540-2043

CERTIFIED # P 368 413 438

June 8 , 1983



Mr. James Trish
Manager of Operations
American Can Company
3801 E. 8th Street
Oakland, California 94604

CAD009 162116

Dear Mr. Trish:

On March 29, 1983 and April 13, 1983 an inspection of your facility was conducted by Barbara Barry and Chuck McLaughlin of the Hazardous Waste Management Branch.

Pursuant to Section 66328(c), California Administrative Code, you are hereby notified of the following conditions observed during the inspection which are alleged to be violations of the California Hazardous Waste Control Act (California Health and Safety Code, Division 20, Chapter 6.5) and California Hazardous Waste Control Regulations (California Administrative Code, Title 22, Division 4, Chapter 30), and the conditions of your Interim Status Document.

- American Can Company is operating a transfer station which was not reported in the Part A application. As this operation is not covered by the Interim Status Document, it is being conducted without a Hazardous Waste Facility Permit in violation of Section 66370, CAC.
- 2) At the time of the inspection, American Can had some containers of waste which may have exceeded the one year time limit. Section 11,1(a) of the ISD.
- 3) Hazardous wastes are not being stored in a secure enclosure and no caution signs are posted on the area where the hazardous waste is stored. Caution signs must contain the prescribed warning and be posted to be visible from any direction of access. Section II,1(c), ISD.
- 4) The hazardous waste area for drums does not have an impervious base; neither storage area has contiguous bases or berms. Section 11,1(d), ISD.
- 5) Lables were not maintained on all containers which held wastes 90 days or more, as specified in the ISD. Sections 11,2(c)1-5, ISD.
- 6) Empty containers which held hazardous materials were not stored, handled, processed and disposed of as hazardous wastes. Section 11,2(d), ISD.

- 7) Neither the entire perimeter of the facility nor the hazardous waste areas are completely enclosed by a fence. Section II 7, ISD
- 8) There is no waste analysis plan as required by the Interim Status Document. Section 111.3. ISD.
- 8a) The Hazardous Waste Analysis Plan shall contain procedures for analyzing all waste materials received to determine all information needed for proper handling. Section 111,3(a)(1), ISD.
- 8b) Additional information to be used for the Waste Analysis Plan must be information on the same waste produced by similar processes. Material Safety Data Sheets on the virgin material may not be used for this purpose. Section 111,3(a) (2), ISD.
- 8c) The plan shall include procedures for both updating the Waste Analysis Plan as needed as well as a schedule for periodic monitoring of data to determine consistancy with established data. Section 111,3(a)(3), ISD.
- 8d) The Waste Analysis Plan shall be followed by the facility from the effective date of the Interim Status Document (March 30, 1981) and the procedures shall be approved by the Department of Health Services, Hazardous Waste Management Branch. This plan shall be kept at the facility. Section III,3(b), ISD.
- 8e) The Waste Analysis Plan shall address the five major areas of concern as described in the Interim Status Document. Section III,3(b)(1-5).
- 9) Hazardous waste signs are not posed on the hazardous waste storage facilities. Section III,4(c).
- 10) There is no procedure for inspection of the hazardous waste area. Section III,5(a), ISD.
- 11) There is no written schedule for inspecting all monitoring equipment, safety and emergency equipment, security devices, and operating and structural equipment. The schedule has not been approved by the Department. The schedule should identify the frequency of inspection. Section III,5(b)(1-5), ISD.

- 12) There is no provision for remedial action approved by the Department. Section III,5(c), ISD.
- 13) There is no inspection log which is to be kept for three years as required by the Interim Status Document. Section III,5(d), ISD.
- 14) There is no formalized plan of classroom or on-the-job training as required in Section III, 6(a)(1), ISD.
- 15) There is no person in the hazardous waste program to implement the training program as required in Section III,6(a)(2), ISD.
- 15a) The training program should include the minimum training as outlined in Section III,6(a)(3), ISD.
- 16) Facility personnel have not yet been trained in a hazardous waste management training program as required, although they have received hazardous materials training. Section III,6(b), ISD.
- 17) Facility personnel do not take part in the annual review of training as required in Section III,6(c), ISD.
- 18) The job title and description for each position which handles hazardous waste must be in writing. In addition, the training required for each position must be in writing. All work experience and training should be thoroughly documented. Section III,6(d)(1-4).
- 19) Training records on every employee must be kept until closure of the facility or until three years after the employee terminates. Section III,e, ISD.
- 20) A berm needs to be constructed to prevent spills from leaving the property. Section III,8, ISD.
- 21) The facility has four plans already in operation, however, some of the requirements for the Contingency Plan are not included in the existing Spill Prevention Control and Countermeasure Plan for Oil and Hazardous Substances, Fire and Emergency Brigade Organization, Fire Prevention Plan, and Emergency Action Plan. Section III, 12(a), ISD.

The additional requirements must be added to the four above mentioned plans as indicated below:

- 21a) The actual agreements in writing need to be included. It is not sufficient to note that the police or fire department will respond. Section III,12(c), ISD.
- 21b) The names and addresses and phone numbers of persons filling job titles need to be added to the plan. Section III, 12(d), ISD.
- 21c) Specific equipment available for emergency use needs to be listed as well as the location, physical description and capabilities. Section III,12(e), ISD.
- 21d) A statement needs to be added to the Contingency Plan giving the times when ammendment is required. Section III,15, ISD.
- 21e) No emergency coordinator is named in any of the facility's plans or in the Operation Plan. Section III,16, ISD.
- 21f) The Emergency Action Plan needs to be ammended to name an Emergency Coordinator who wil also immediately notify the State Department of Health Services within 24 hours of an occurrence. Section III,17(a)(3), ISD.
- 21g) The plan needs to be redone to consolidate pertinent information so it can be found in an emergency. Section III,17(a), ISD.
- 22) A procedure needs to be developed for identifying and tracking hazardous wastes generated at your facility plus the wastes received in your capacity as a transfer station. Section IV.1(b)(2), ISD.
- 22a) The records and results of waste analyses and trial tests for both material generated on-site and as a transfer station should be included. Section IV, I(b) (3), ISD.
- 23) The records and results of inspections need to be kept three (3) years. Section IV,1(b)(5), ISD.
- 24) The Annual Report has not been submitted. Section IV,3 (a-g), ISD.
- 25) Procedures for submission of special reports on releases, fires, explosions, groundwater contamination and monitoring data, and facility closure should be developed. Section IV,4(a-c), ISD.

- 26) The facility has no formalized written closure plan. Such a plan must be developed. Section V, 2(a)(1-4), ISD.
- 26a) The Closure Plan must include the minimum requirements listed in the Interim Status Document. Section V,2(a) (1-4), ISD.
- 26b) The Closure Plan must indicate when it must be revised. Section V,2(b), ISD.
- 26c) The Closure Plan must indicate that it will be submitted to the Department of Health Services, Hazardous Waste Management Branch 180 days prior to the start of closure. Section V,2(c), ISD revised.
- 26d) The Closure Plan must indicate that within 90 days of receipt of final volume of hazardous wastes they shall be treated, disposed of on-site or removed from the site to a proper disposal facility. Section V,3 (a), ISD.
- 26e) The Closure Plan must indicate that all closure activities must be completed within six months of receipt of the final volume of wastes unless an extension has been granted by the Hazardous Waste Management Branch. Section V,3(b), ISD revised.
- 26f) The closure plan shall address the decontamination of all facility equipment and structures or their proper disposal. Section V, 4, ISD.
- 26g) The closure plan shall make provisions for certification by both American Can and an independent registered professional engineer that the facility has been closed in accordance with the closure plan. Section V,5, ISD revised. This certification shall be submitted to the Hazardous Waste Management Branch.
- 27) The facility must make provisions for an annual update on the closure Cost Estimate. Section VI,1(c) ISD.
- 28) The facility shall inspect container storage areas as required by the ISD. Section VII,4,ISD.

Section 66328(d) C.A.C. states: "If corrections are needed, the operator shall provide to the Department a written plan of correction which states the actions to be taken and the expected dates of completion".

You are hereby directed to submit a Plan of Correction to this office, pursuant to Section 66328(d) C.A.C., which describes the steps you will take to correct these deficiencies. Your Plan of Correction must be received at this office within 30 days of the date of this letter.

Your attention is directed to Sections 25188, 25189, and 25191 of the California Hazardous Waste Control Law, which provide for civil and criminal penalties of up to \$25,000 per day per violation for violations of the California Hazardous Waste Control Law and Regulations, Hazardous Waste Facility Permit, or Interim Status Document.

If you have any questions concerning this matter plase contact Barbara Barry of this office at (415) 540-2057.

Sincerely yours,

Charles A. White, P.E., Regional Administrator

Hazardous Waste Management Branch

North Coast Region

cc: Paul Blais, U.S. EPA, Region IX

> Harold Singer, R W Q C B, Oakland

Gerald Winn, Director Environmental Health Services Alameda County

DEPARTMENT OF TOXIC SUBSTANCES CONTROL

REGION 2 700 HEINZ AVE., SUITE 200 BERKELEY, CA 94710-2737



June 9, 1992

CERTIFIED MAIL

Mr. Joseph Moran Assistant General Counsel-Environmental American National Can Company 877 West Bryn Mawr Avenue Chicago, Illinois 60631-3542

Dear Mr. Moran:

AMERICAN NATIONAL CAN COMPANY - 3801 EAST EIGHTH STREET, OAKLAND, CALIFORNIA 94604 - EPA I.D. NO. CAD009162116

This letter addresses three items that arose during the inspection by the California Environmental Protection Agency, Department of Toxic Substances Control (Department) on December 11, 1991. The three point are:

- Report of Violation submittals
- Amended Report of Violation to include Financial Responsibility review deficiencies
- · Closure Report Review

Report of Violation submittals

The Department is in receipt of your submittals dated March 27, 1992 (letter) and April 28, 1992 (received by fax). These submittals were in response to the Report of Violation and Schedule of Compliance issued on February 13, 1992. The Department has reviewed your submittals and has determined that the above referenced facility is in compliance with the violations identified in the Report of Violation dated February 13, 1992.

Financial Review

The Department has received the results of a financial responsibility review which found that no financial assurance or liability coverage exists for the subject facility. The following additional violations are a result of that review:



Mr. Joseph Moran Page Two June 9, 1992

Additional Violations

11. Title 22, Cal. Code Regs., Section 66264.147(a).

On or about 2/5/92 American National Can Company, (ANCC) violated Title 22, Cal. Code Regs., Section 66264.147(a) in that ANCC failed to maintain liability coverage for sudden and accidental occurrences in the amount of at least \$1 million per occurrence per facility with an annual aggregate of at least \$2 million per facility, exclusive of legal defense costs.

12. Title 22, Cal. Code Regs., Section 66264.143.

On or about 2/5/92 ANCC violated Title 22, Cal. Code Regs., Section 66264.143 in that ANCC failed to establish and demonstrate to the Department financial assurance for closure of the facility.

Within 30 days please submit a response to the above violations to the Department.

Closure Report Review

Finally, the closure report dated November 21, 1991 submitted to the Department shows that two soil borings were taken (SB-14 and SB-16) from the area surrounding the wash shed. The analytical results (Attachment C of the Closure Report) show that the following samples were submitted for analyses:

SB-11 S-2	\$B-11 S-5	SB-13A S-1	SB-13A S-4
SB-14 S-3	SB-14 S-6	SB-15 S-3	SB-15 S-6
SB-16 S-4	SB-16 S-7	SB-17 S-3	

Nowhere in the discussion in the Closure Report was there a mention of the location and depth of the above samples. Only a map is provided showing two sample locations (SB-14 and SB-16). The letter from Alameda County Environmental Health dated April 17, 1991 indicated that, "analyses indicate no contamination resulting from the types of liquid waste stored in this area". What analyses is the letter referring to? Additionally, lab results provided in the closure report show that samples were analyzed following methods 8240 and 8270. Were analyses conducted to detect metals? And if so, what methods were used?

Pursuant to the Health and Safety Code Section 25185.6 the Department requests that American National Can Company submit clarification to the issues raised in the Closure Report.

Mr. Joseph Moran Page Three June 9, 1992

If you have any questions, please call Patricia Barni at (510) 540-3861.

Sincerely,

David Wampler

Hazardous Materials Specialist Surveillance & Enforcement Branch

Patricia Bourn

Patricia Barni

Senior Hazardous Materials

Specialist

Surveillance & Enforcement Branch

Certified Mail No. P659118407

cc: See next page

Mr. Joseph Moran Page Four June 9, 1992

CC: Lily Wong - Mail Stop H-4-1
U.S. EPA Region IX
75 Hawthorne Street
San Francisco, California 94105

Mr. Larry Matz Surveillance and Enforcement Department of Toxic Substances Control P.O. Box 806 Sacramento, California 95812-0806

Mike Shepard
Toxics Legal Office
Department of Toxic Substances Control
P.O. Box 806
Sacramento, California 95812-0806

Mr. Edgar Howell
Alameda County Department of
Environmental Health
Division of Hazardous Waste Management
80 Swan Way, Room 200
Oakland, California 94621

Ms. Judy Peters Environmental Engineer American National Can 8770 W. Bryn Mawr Chicago, Illinois 60631

Leroy Smith
American National Can Company
3801 East Eighth Street
Oakland, California 94604

DEPARTMENT OF HEALTH SERVICES

2151 BERKELEY WAY EERKELEY, CA 94704



December 4, 1986

James A. Long, Sr. Vice President Mergers and Acquisition American Can Company American Lane, P.O. Box 3610 Greenwich, Connecticut 06836-3610

Dear Mr. Long:

TRANSFER OF FACILITY OWNERSHIP CAD009162116 OAKLAND FACILITY CAD990768871 SAN JOSE FACILITY

This acknowledges your letter of October 28, 1986 requesting a minor modification of the hazardous waste facility permits for the Oakland and the San Jose facilities to reflect change in ownership. We understand that effective on October 31, 1986 ownership and operational control of these permitted facilities have been transferred from American Can Company, a new Jersey Corporation to American Can Packaging Inc., a Delaware Corporation and wholly-owned subsidiary of Triangle Industries Inc.

The Department accepts minor modification of the permits. To reflect such permit amendments a copy of this letter will be included in our permit files. The Federal Environmental Protection Agency and the San Francisco Regional Water Quality Control Board will be advised of the ownership changes by copy of this letter.

Please send the Financial Assurance Documents to the attention of Ms. Iran Haefele at 714/744 "P" Street, Sacramento, CA 95814.

If you have any questions pertaining to this letter, please contact Sonia S. Low at (415) 540-2747.

Sincerely,

Michael R. James, Chief

Permit Unit Chief

North Coast California Section Toxic Substances Control Division

cc: Timothy G. Rogers - American Can Co.
 Mostafa Radmand - USEPA

Mostafa Radmand - USEPA Harold Singer - SFRWQCB

Iran Halfele - DOHS/Financial Assurance

MRJ:ssl:adc

JEPARTMENT OF HEALTH SERVICES

TOXIC SUBSTANCES CONTROL DIVISION NORTHERN CALIFORNIA SECTION 4250 POWER INN ROAD SACRAMENTO, CA 95826 (916) 739-3145





July 15, 1985

*85 JUL 18 /10:12

Ms. Laura DeArmond American Can Company P.O. Box 2092 3801 E. 8th Street Oakland, CA 94604

CADOOG162116

Dear Ms. DeArmond:

WITHDRAWAL OF ISD DETERMINATION

The Department of Health Services has received your request to have your Interim Status Document (ISD) be no longer in effect, as the hazardous waste facility permit requirements no longer apply to your specified operation. An inspection of your facility, located in Lindsay, in February 1985 indicated the following:

- o Hazardous wastes are not stored on-site for more than 90 days.
- o Hazardous wastes are not received from off-site facilities.
- o Hazardous wastes are not treated on-site.
- o Hazardous wastes are not disposed of on-site.

Based on this information, the Department hereby notifies you that your facility in Lindsay is not regulated as a treatment, storage or disposal facility under the State law and regulations as authorized by the Environmental Protection Agency according to the provisions of the Resource Conservation and Recovery Act. Therefore, your ISD is no longer in effect.

Please be advised that should you wish to operate a hazardous waste facility in the future, you will need to first obtain the facility permit prior to commencing operation. ISDs will not be reinstated.

Your company will still be a producer of hazardous waste and as such has the responsibility of handling those wastes properly (e.g., use of the manifest, use of registered hazardous waste hauler, etc.).

If you have any questions regarding this matter, please call Watson Gin of this office at (916) 739-2827.

James T. Allen, Ph.D.

Chief, Northern California Section

cc: U.S. EPA, Region IX, San Francisco

Mr. John Masterman, DOHS-TSCD-PMS

